

CITY OF LIVERPOOL.



EDUCATION COMMITTEE.

REPORT

ON THE WORK OF THE

SCHOOL HEALTH SERVICE

FOR THE YEAR

1951

BY

W. M. FRAZER, O.B.E., M.D., Ch.B., M.Sc., D.P.H.,
Barrister-at-Law,

Medical Officer to the Education Authority

(Received by the Education Committee, 21st July, 1952.)

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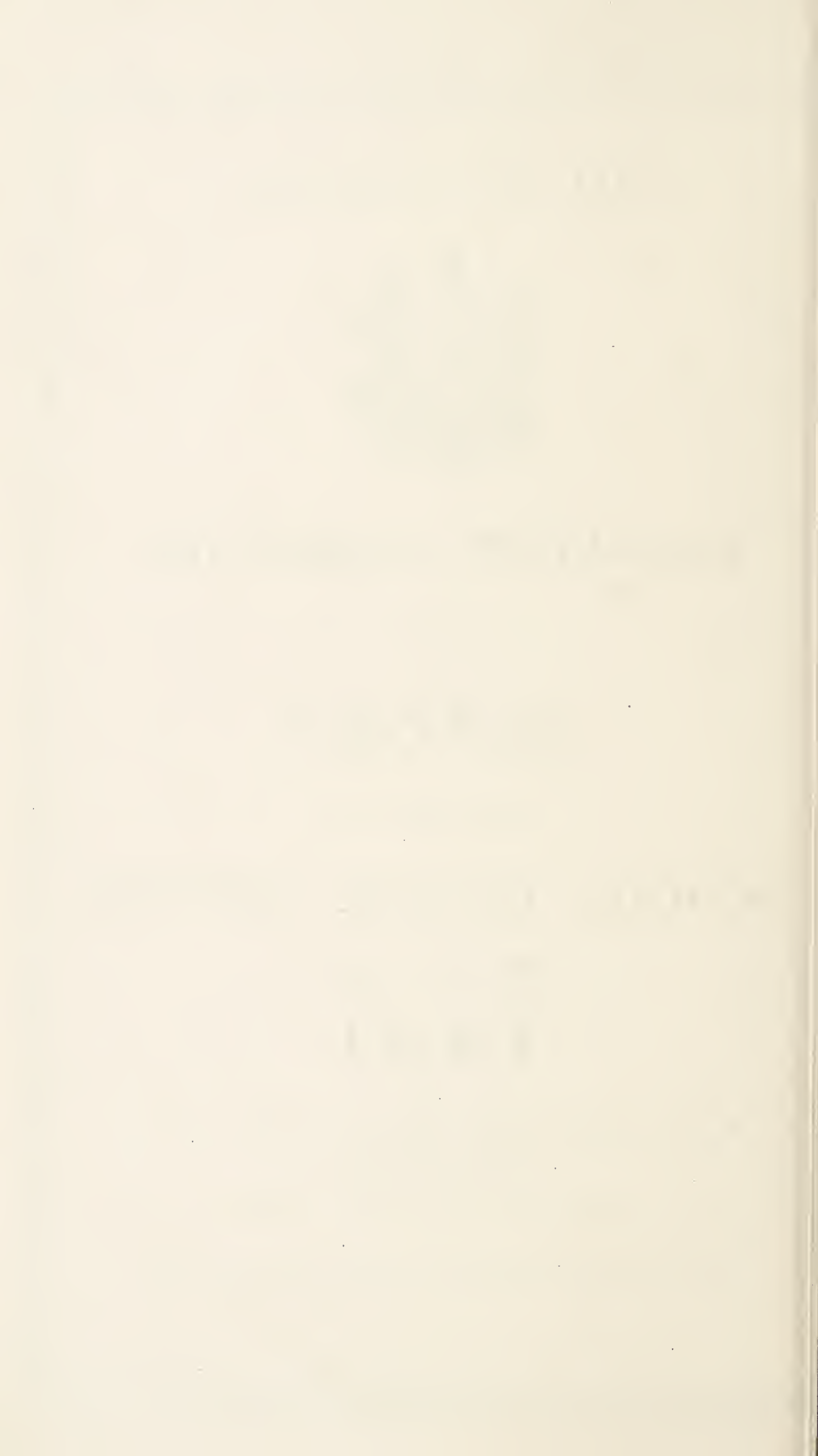
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D.C.H., D.P.H.

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Senior School Dental Officer.

T. H. PARSONS, L.D.S., R.C.S.(Eng.).

Whole-time Assistant School Dental Officers.

A. BREWER, L.D.S. (<i>Died</i> 6.8.51)	J. W. MARTIN, L.D.S.
KATHLEEN F. HOSSACK, L.D.S.	J. A. WOOD, L.D.S.
(<i>Resigned</i> 31.12.51)	
F. C. LITTLETON, L.D.S.	W. F. WREN, B.D.S.
(<i>Resigned</i> 31.5.51)	

Part-time Assistant School Dental Officers.

J. A. BELL, L.D.S.
 J. P. BLACOE, L.D.S.
 ZILLAH A. FAIRHURST, L.D.S., R.C.S (ENG.).
 CATHERINE T. GREEN, L.D.S. (*From* 22.10.51).
 JOSE LEE, L.D.S.
 G. E. NEVINS, L.D.S. (*From* 4.6.51).

Whole-time Psychologist.

M. CHAZAN, M.A.

Speech Therapist.

W. G. GOOD, L.C.S.T. (*From* 29.8.51).

Part-time Specialist Officers.

Oculists.

ERNEST ALLAN, M.B., Ch.B., D.O.M.S. (Also Visiting Oculist for Classes for Partially-sighted Children).
 DAVID BLACK, M.B., B.Ch., B.A.O., D.O.M.S. (Also Visiting Oculist for Partially-sighted Children).
 NORMAN DONALDSON, M.B., B.Ch., B.A.O., D.O.M.S.
 NORA M. ENGLISH, M.B., B.Ch., B.A.O., D.O.
 JOHN N. MATTHEWS, M.R.C.S., L.R.C.P., D.P.H.

Orthopaedic Surgeons.

H. G. A. ALMOND, M.R.C.S., L.R.C.P., M.B., Ch.B., M.Ch. (Orth.), F.R.C.S.
 F. C. DWYER, M.B., F.R.C.S., M.Ch. (Orth.).
 R. ROAF, M.A., M.R.C.S., L.R.C.P., B.M., B.Ch., F.R.C.S.E., F.R.C.S., M.Ch. (Orth.).

Paediatric Consultant.

JOHN D. HAY, M.A., M.D., M.R.C.P., D.C.H. (*From* 5.9.51).

Psychiatrist.

IVAN LEVESON, M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.M.

Surgeon i/c of Aural Scheme and Aurist for Crown Street School for the Deaf.

COURTENAY YORKE, M.D., F.R.C.S.

Approved Officers for Educationally Sub-normal Children.

WILHELMINA L. DEVLIN, M.B., Ch.B., D.P.H., D.P.M.

F. HOPKINS, M.D., B.Ch., B.A.O.

School Nurses, Etc.

Superintendent: Miss M. SNODDON.

Deputy Superintendent: Miss W. K. POOLE.

Supervisor: Miss B. M. SPELLER (*Retired 2.5.51*).

Also:—43 Permanent nurses.

17 Temporary nurses.

2 Physiotherapists.


13 Clinic Helpers (including 10 part-time).

7 Dental Attendants.

Clerical.

Senior Administrative Assistant: Mr. C. CRESSWELL.

Also:—45 Clerks.



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CITY OF LIVERPOOL.

EDUCATION COMMITTEE.

REPORT of the MEDICAL OFFICER to the Education Authority for the Year ended 31st December, 1951.

Introduction.

The Medical Officer submits herewith his Report on the work of the School Health Service for the year 1951.

1. The work of the Department has continued along the general lines as described in my previous Reports. The Report for 1950 recorded the commencement of a scheme for the testing of the hearing of all children of 8 years of age by means of an audiometer. The results of the first full year's working of this scheme, given in the Section "Ear, Nose and Throat Conditions", confirms the usefulness of such a scheme in the prevention of the disability of defective hearing.

2. There has now been added to the staff the services of a Consultant Paediatrician and the Committee have been fortunate in securing the services of Dr. John Hay. Dr. Hay takes a weekly clinic where he sees cases of heart disability referred by the School Medical Officers. This clinic opened in September and has proved to be of great value. Because

of the relatively short time it has been in operation it was not considered advisable to attempt any detailed report of the work of the clinic this year.

3. The Medical Officer regrets to report the death during the year of Mr. A. Brewer, L.D.S., who was on the School Dental staff. Mr. Brewer had rendered 22 years of valuable service to the Authority.

Resignations during the year included those of Dr. B. S. Jarvis and Mr. F. C. Littleton, L.D.S., both of whom had been over 20 years with the Authority. Other resignations were those of Dr. W. M. Hunter and Mrs. K. F. Hossack, L.D.S.

There were four retirements from the staff of School Health Visitors during 1951. Miss B. M. Speller, a Supervisor of School Nurses, after 42 years' service, and Miss Foulkes, Mrs. Kenyon and Miss Wealthy, School Health Visitors, all with over 20 years' service.

4. The benefits which are derived from tonsillectomy have always been the subject of debate since the inception of this operation. Recently there has been renewed interest in this subject and more conservative view points have been put forward. Arguments are often based upon what amounts to not much more than personal opinion. It is, therefore, very useful to have investigations such as that carried out by Dr. Godwin during the year and incorporated in the section of this Report dealing with "Ear, Nose and Throat Conditions".

It is in the field of such investigations that the staffs of school medical services of large authorities have unique opportunities. Dr. Godwin is to be commended for this work and it is hoped that other members of the staff will follow his example.

5. As has been revealed year after year in these Reports, the problem of verminous infestation remains very difficult of solution. It is true that since the inception of the School Health Service the 90 per cent.

infestation has been reduced to between 15 and 20 per cent. but has tended to remain fixed at this latter percentage.

As pointed out in the Section of the Report dealing with "Uncleanliness", there would appear to be little excuse for this situation in view of the effectiveness of insecticides now available. The problem is not with the 15 to 20 per cent. of pupils but with the one and two per cent. who are chronically infested. It would appear that no amount of ordinary educative work will achieve much with these persons and, therefore, during the year, twelve prosecutions, involving fifteen children, have been taken. On behalf of such persons, poor housing conditions have been given as an excuse, but as the lice which infest humans do not live apart from the human body, housing conditions can play little, if any, part in these cases.

It is considered that only by making it clear that prosecutions will be taken in every case where necessary that eventual success will be achieved, and this is the policy which is now being followed.

6. After a period of two years the Committee have succeeded in obtaining the services of a Speech Therapist, and Mr. W. G. Good, the Senior Speech Therapist, commenced duty in August. As single-handed speech therapist in Liverpool it has been necessary for him merely to deal with the most severely handicapped children. It is hoped to augment the staff of Speech Therapists in the coming year.

7. The Swiss people have again revealed their generosity in acting as hosts to a party of asthmatic children for a four to six months' stay in Switzerland. Five children were sent from Liverpool and were very much benefited by their stay.

The Swiss Red Cross were also partners in another scheme whereby sixteen Liverpool children, who either had had tubercular infection or were contacts of such cases, have been six months in Switzerland. In making arrangements for the visit of this latter party the local branch of the British Red Cross were extremely helpful.

8. It is felt that the year under review has been one of progress and this progress has only been achieved by the conscientious work of professional and lay staff.

The Medical Officer would like to take this opportunity of expressing to them his appreciation of their year's work.

9. It is again a pleasure to be able to record the harmonious relationship which exists between the School Health Service and both the general practitioners and hospital staffs.

10. The Medical Officer expresses his appreciation to the Director of Education for supplying many items incorporated in the body of this Report, particularly in connection with the work of the Special Schools, the Youth Employment Bureau, the School Meals Service, and the School Welfare Department.

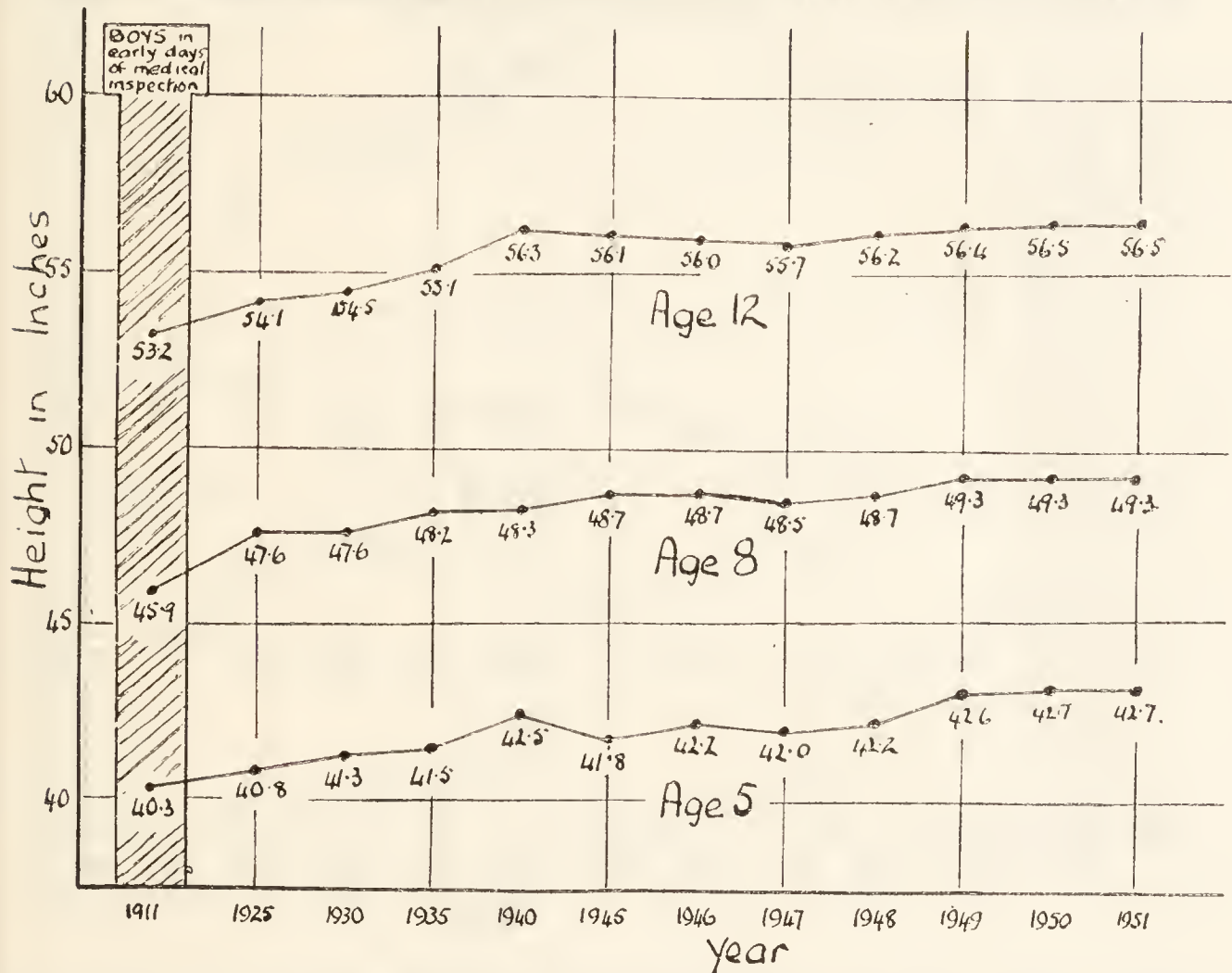
GENERAL CONDITION.

11. Efforts have been continued to obtain more uniformity amongst the school medical officers in the classification of General Condition. There has been achieved a greater degree of uniformity but the results are still far removed from that wished for in this new scheme of grading. The difficulty, as stated in previous reports, is the attempt to alter the generally accepted meanings of the words "good" and "fair." In the "Health of the School Child" for 1948 and 1949 it is stated that the word "fair" should be used to mean satisfactory. Consulting the dictionary (Chambers) a meaning given for "good" is satisfactory. Also, the opinion of the doctors doing this grading in Liverpool is that the grading requires a fourth group between the normal and the poor. In other words, that the former classification was much better than that now in use, with the modification that general condition should be the basis rather than simply nutrition.

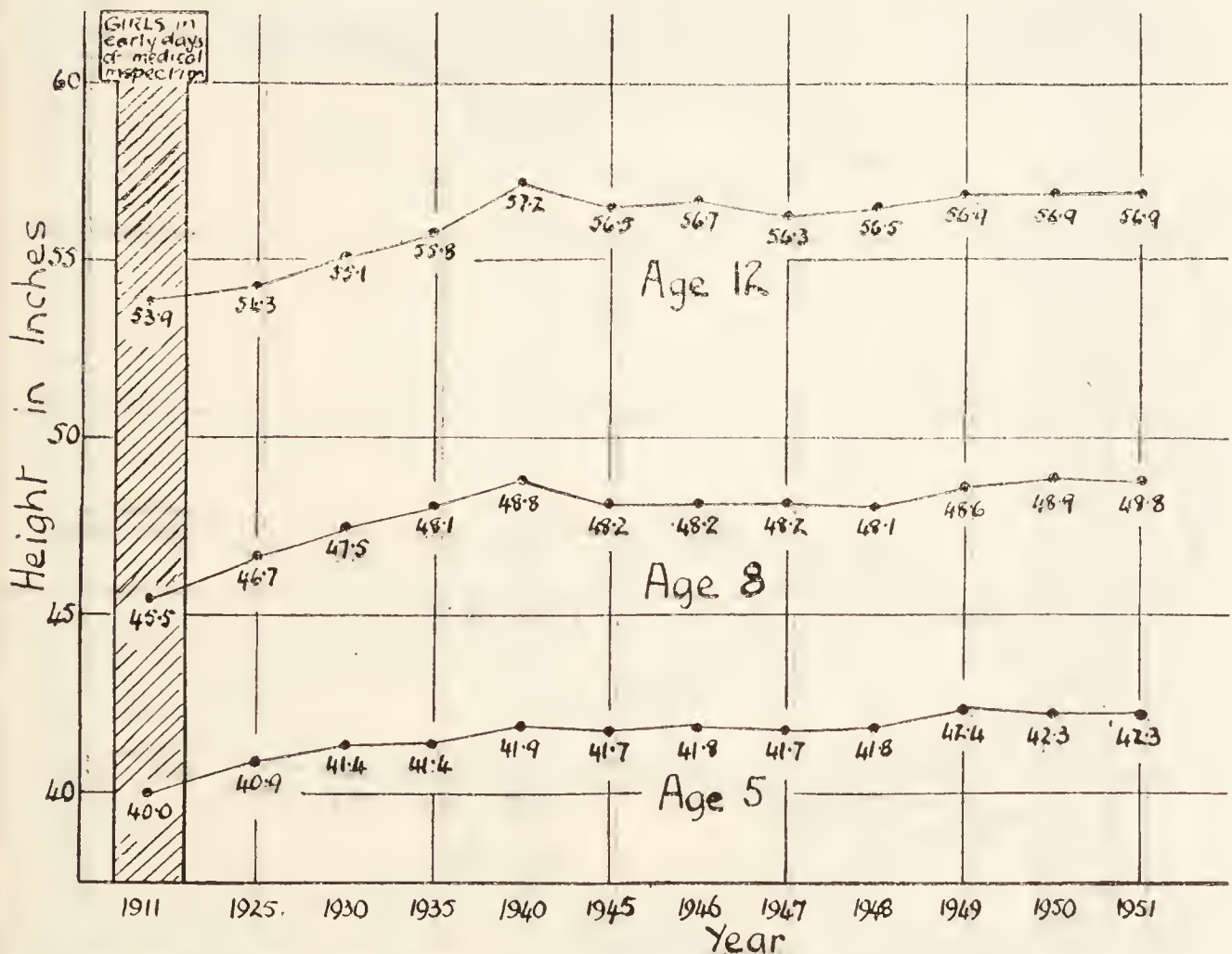
Comparative Heights and Weights.

12. The heights and weights of the children in the selected groups of schools representing "Good", "Fair" and "Poor" districts show little change from those of the previous year.

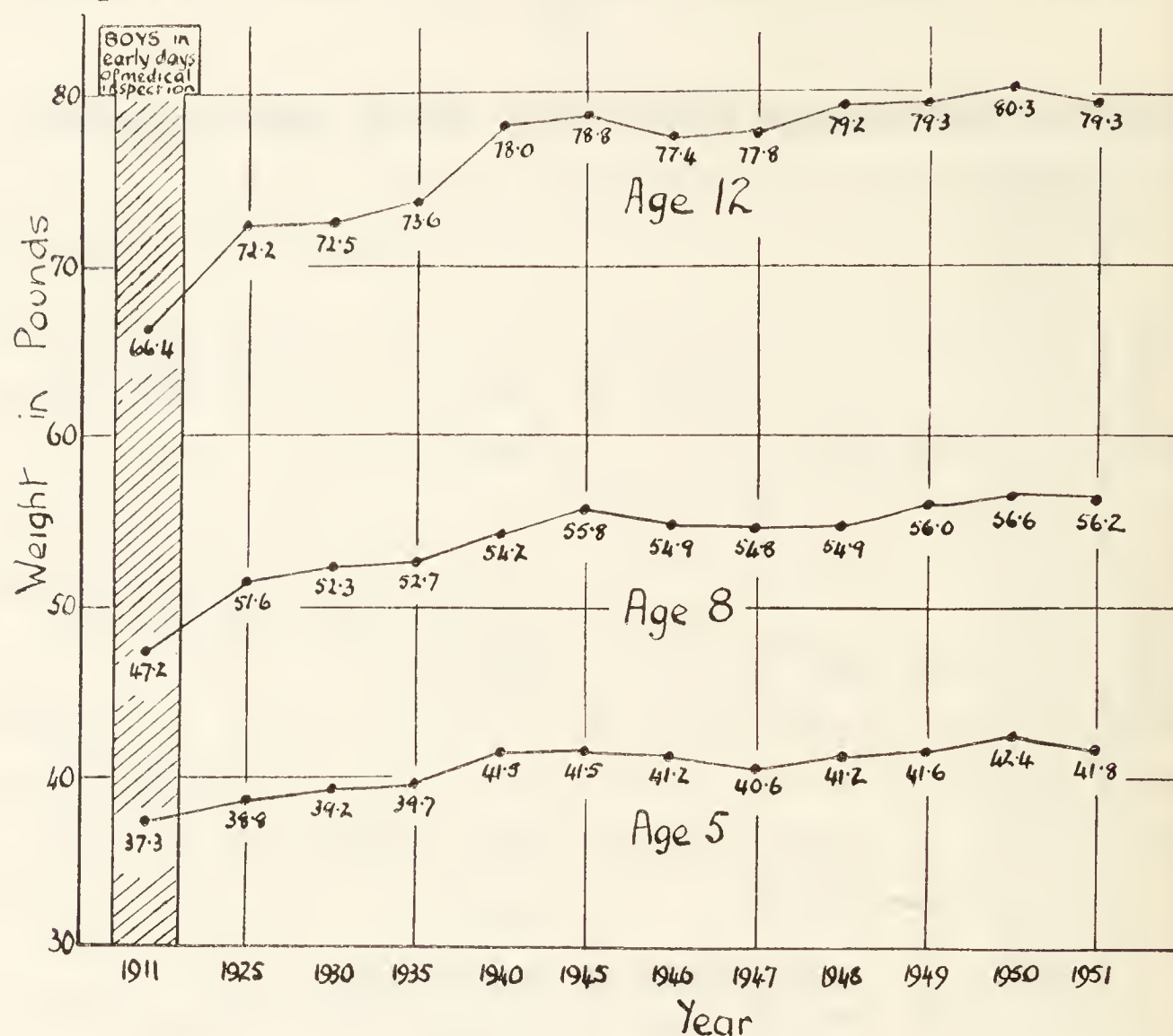
Comparative Average HEIGHTS of BOYS, Ages 5, 8 and 12.



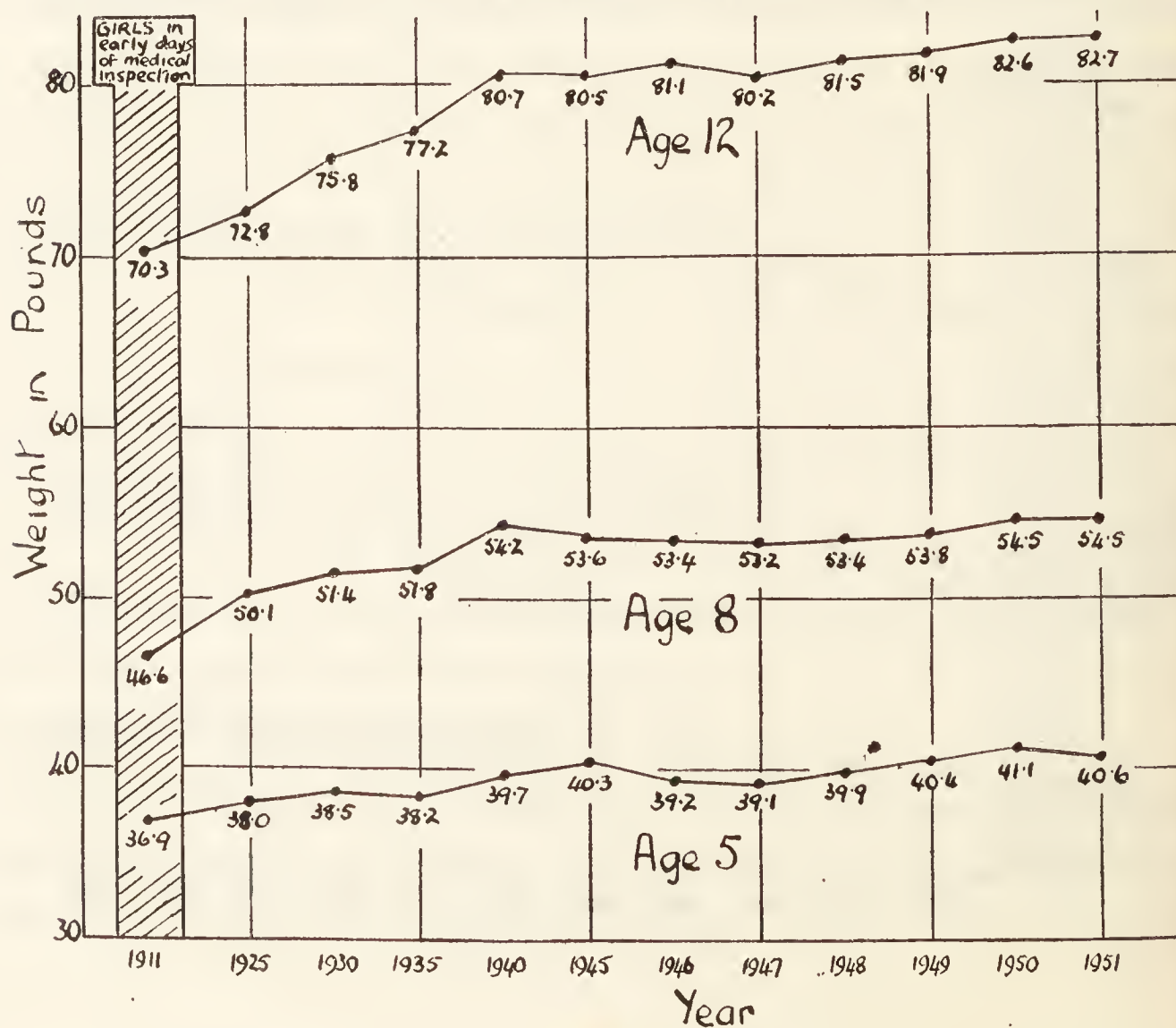
Comparative Average HEIGHTS of GIRLS, Ages 5, 8 and 12.



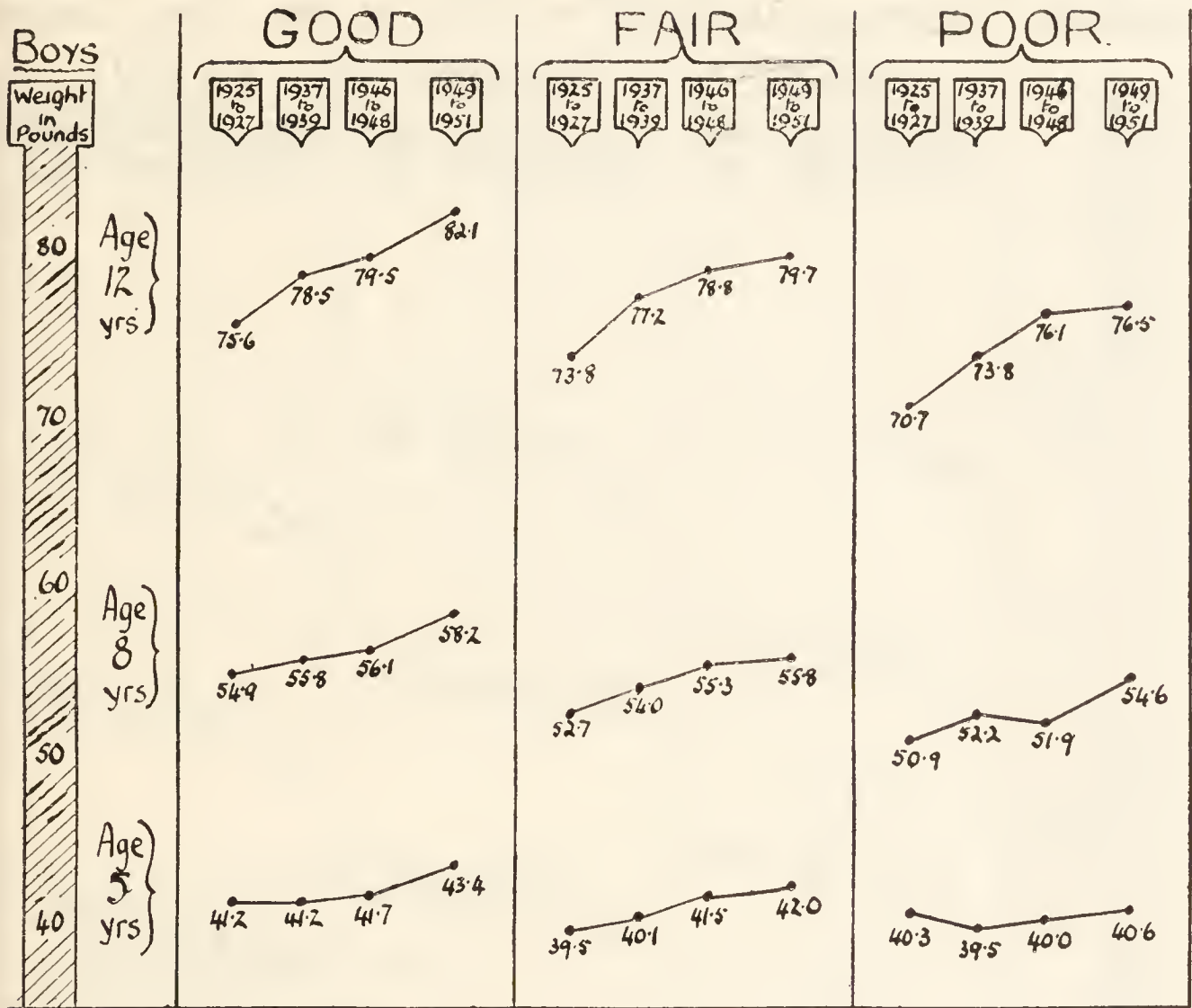
Comparative Average WEIGHTS of BOYS, Ages 5, 8 and 12.



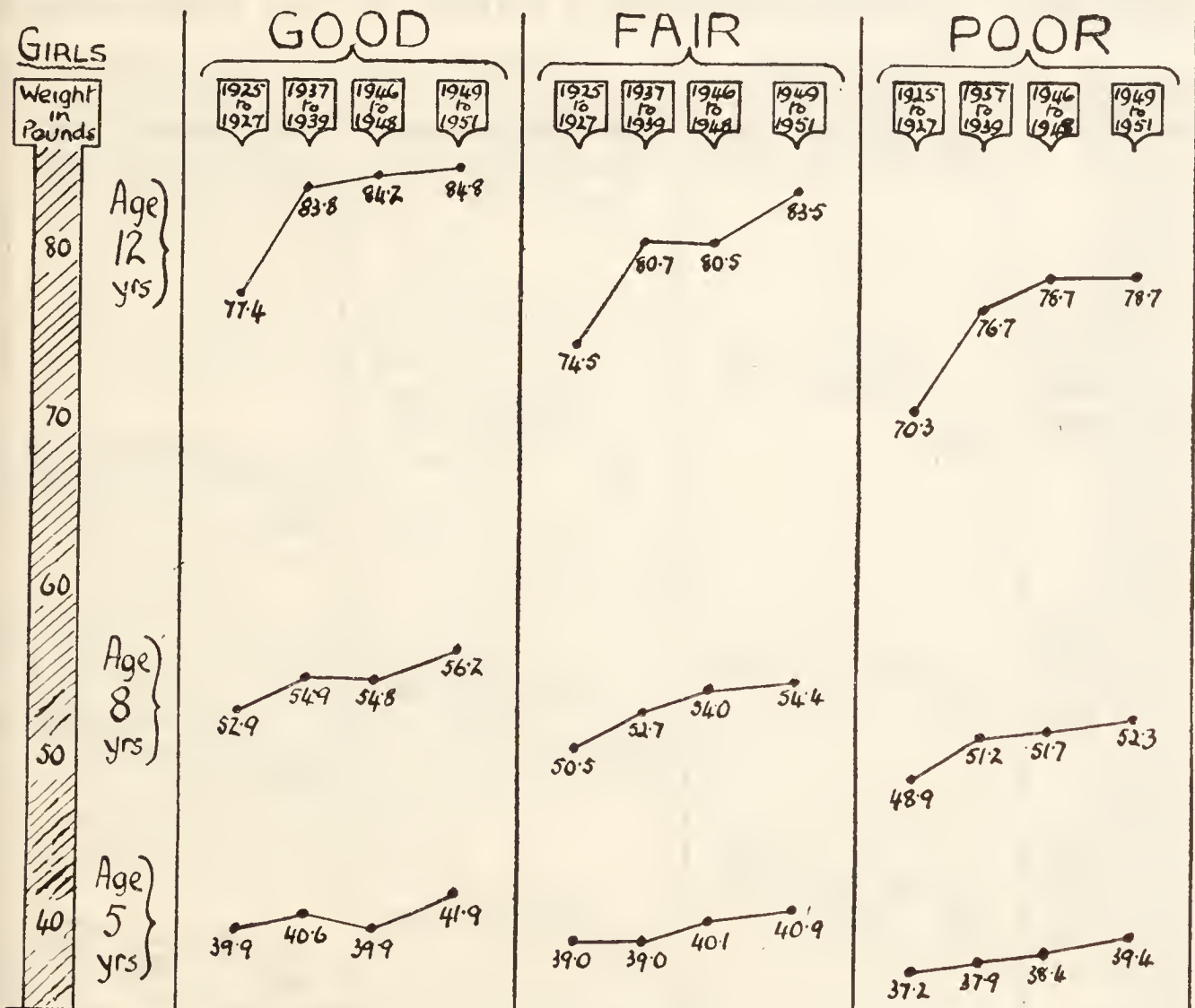
Comparative Average WEIGHTS of GIRLS, Ages 5, 8 and 12.



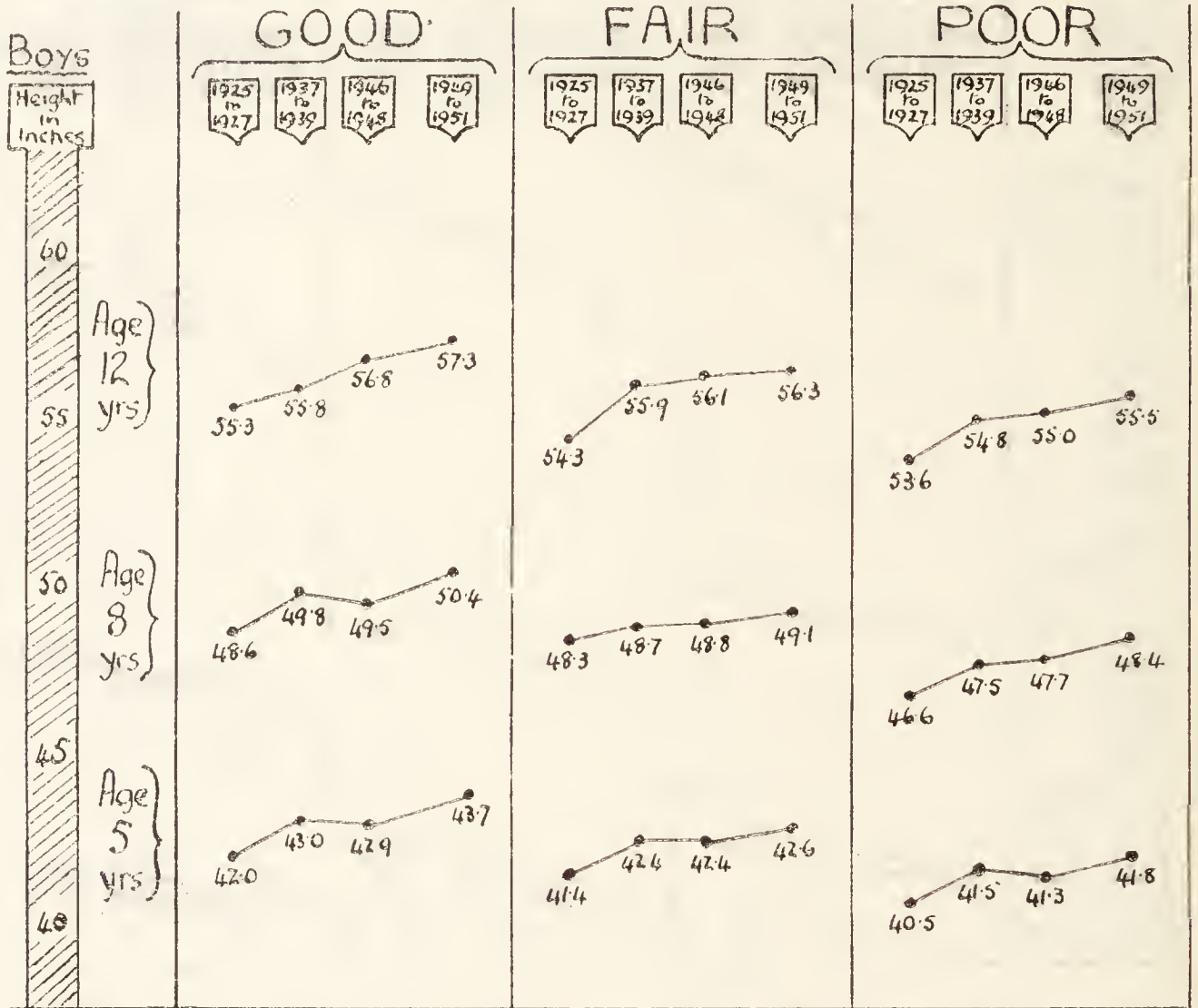
Comparative Average WEIGHTS of BOYS in four 3-year periods.



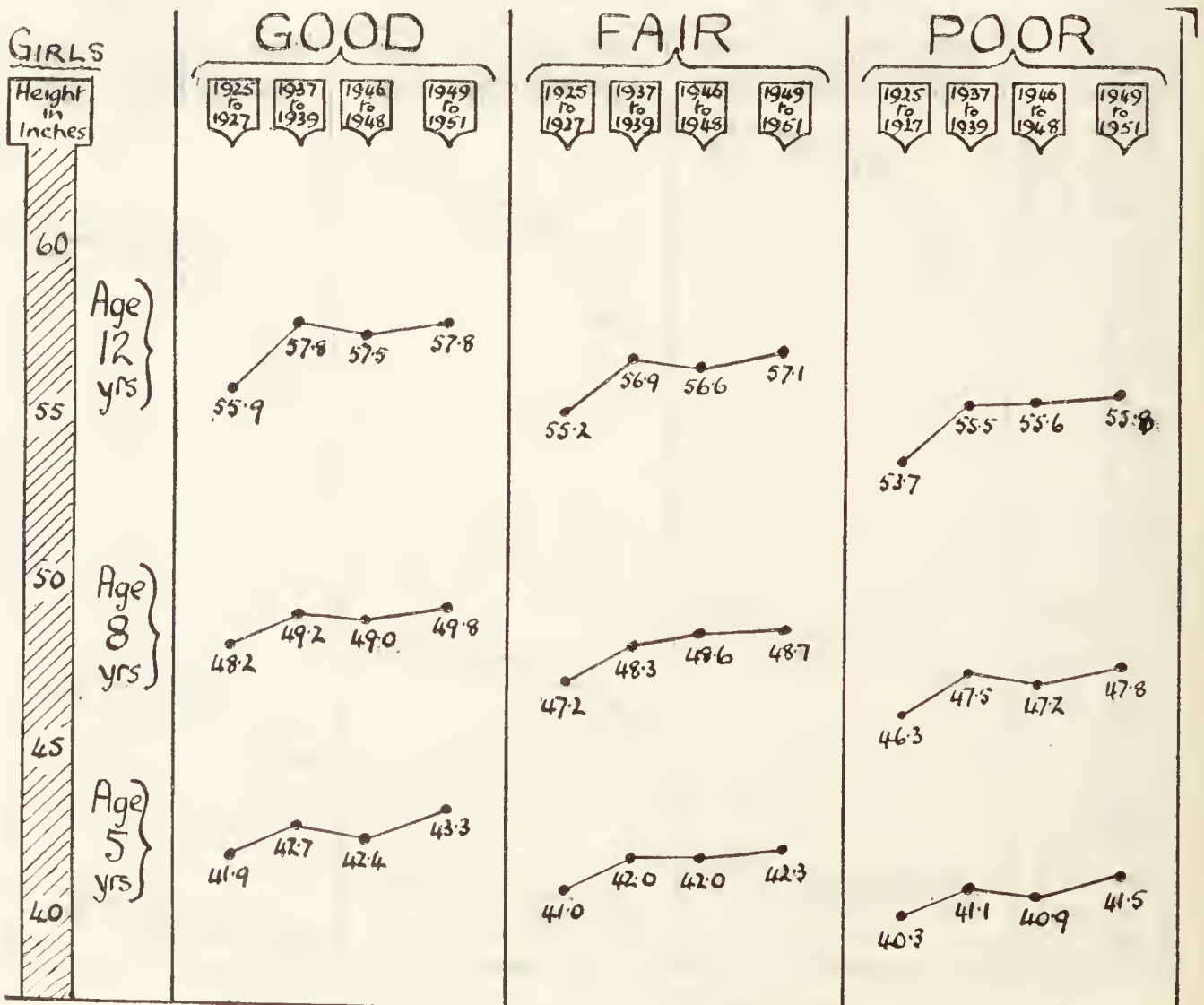
Comparative Average WEIGHTS of GIRLS in four 3-year periods.



Comparative Average HEIGHTS of BOYS in four 3-year periods.



Comparative Average HEIGHTS of GIRLS in four 3-year periods.



SCHOOL MEALS SERVICE.

Kitchens and Canteens.

13. During the year work proceeded on building projects for the School Meals Service which had been approved by the Ministry of Education prior to the restrictions imposed in October, 1949, and one Central Kitchen and five Kitchen/Dining Rooms, with a cooking capacity of 4,575 meals daily, and seating accommodation for 2,255 children in two sittings, were completed. Kitchens with a cooking capacity of 1,775 meals daily and dining accommodation for 1,275 children in two sittings, were also completed in new schools, which were included in the building programme for Primary and Secondary Modern Schools.

14. Seventeen Kitchen/Dining Rooms, on or near sites of schools, three Dining Rooms in school premises, and three Dining Rooms in rented premises, were opened during the year, as follows:—

	Capacity (No. of Meals daily).	Seating Accom. (2 Sittings).
(a) Combined Kitchen/Dining Rooms :		
*Abingdon Road	750	—
*Kilrea Road Special School	100	—
*Kinglake Street	2,000	—
*St. Oswald's R.C. School	750	—
*Athol Street	500	—
Mosspsits Lane County School	500	500
Orwell Road	750	250
		(additional)
Roscommon Street County School	700	700
St. Alexander's R.C. School	500	500
St. Francis Xavier's R.C. School (Salisbury Street)	750	430
St. Francis Xavier's R.C. School (Haigh Street) ...	750	250
(b) Combined Kitchen/Dining Rooms in Schools :		
*Cantril Farm County School	250	—
Loraine Street County School	375	375
Olive Mount County School	375	375
Prince Rupert (Margaret Street) County School ...	375	375
St. Christopher's R.C. School	500	250
†St. Anthony of Padua's R.C. School	—	120
		at present
(c) Dining Rooms in School Premises :		
Friary R.C. School	—	324
Dingle Lane Special School	—	90
Our Lady of Mount Carmel R.C. School, South Hill Road... ..	—	400
Gillmoss R.C. Extension (Infants)	—	12
(d) Monksdown Road County School :		
(Transferred from school building)	—	240
(e) Dining Rooms in Rented Premises :		
Woolton Congregational Church Hall (to replace Out Lane Dining Centre— building unsafe) ...	—	160
St. Vincent's R.C. Boys' Club	—	260
Hyslop Street Mission Hall	—	300
	9,925	5,911

NOTES.—*Dining Rooms already open.

† Not yet complete—part of Dining Room opened as a temporary measure.

15. The acquisition of these additional cooking facilities during the year made it possible to effect economies in the Service by closing three of the older Central Kitchens at Heath Road, Townsend Lane and Mab Lane, which had a combined cooking capacity of 7,500 meals daily, at which considerable expenditure would have been necessary to carry out work required by the Medical Officer of Health to comply with the Food and Drugs Act, 1938. The meals provided from these premises were concentrated in the new Central Kitchen at Muirhead Avenue, which opened in January, 1952, and in other more up-to-date Kitchens throughout the City which were producing meals below their full capacity.

The provision of additional dining accommodation in Kitchen/Dining Rooms and Schools diminished the need for Dining Centres in some areas and arrangements were accordingly made for four Dining Centres in hired premises to be closed. Canteens in four schools became redundant on re-organisation and two canteens in hired premises were closed for reasons outside the control of the Committee. All the children displaced from these premises were accommodated in other canteens conveniently situated to the schools at which the children attended.

16. New cooking equipment was installed at the Green Lane Central Kitchen to replace equipment which had been in use for many years, and had become unserviceable. Within the limit of expenditure on minor projects imposed by the Ministry of Education, improvements at a number of canteens were effected during the year and new and additional equipment was installed in the Kitchens of three Secondary Grammar Schools in order to bring the facilities for the cooking and serving of meals up to modern standards.

Number of Dinners Served.

17. The numbers of dinners supplied to pupils in maintained Primary and Secondary Schools on a day selected in each of the months of February and October, 1951, were as follows:—

	1951	
	February.	October.
Number of Kitchens	67	74
Number of children present in the schools on day selected	113,934	119,870
Number of pupils provided with dinners	44,993	45,044
Percentage of pupils who were supplied with dinners.	39·49%	37·57%
Number of Canteens	240	239
Number of Schools and Departments served	413	417

In addition, dinners were also supplied to the following:—

	1951	
	February.	October.
Direct Grant Schools	890	1,022
Day Special Schools	1,468	1,459
Nursery Schools	383	434
Nurseries administered by the Medical Officer of Health.	598	674
Occupational Centres administered by the Medical Officer of Health	63	181
Adults—Canteen and Teaching Staffs	3,556	3,541
	6,958	7,311

The total number of dinners supplied during the year was 10,717,003 (Children 9,821,712, Adults 895,291).

18. Canteens were also in service at the College of Commerce, eight Evening Institutes, and eight other Further Education Establishments.

19. The decline of approximately 112,000 in the number of meals served during the year (which was very much less than in the previous year) was partly due to an influenza epidemic early in the year, and to the large number of occasional holidays during the early summer months.

The reduction in the number of meals was nevertheless the cause of serious concern, and the Managers, Governors and Heads of schools were asked to co-operate in drawing the attention of parents to the benefits which children derive from staying at school for their mid-day meals, and in encouraging more parents to permit their children to take advantage of the facilities provided. An investigation was made to ascertain if possible the reasons for the low percentage of children who were taking dinners in certain schools, and in these particular cases it was found that the main reasons were that the parents were unable to pay for the meal on account of their financial circumstances, and that mothers preferred their children to go home for dinner.

The records show that between the 1st April and the 31st August, 1951, approximately 230,000 more meals were provided than in the corresponding period last year, and it is felt that there is reasonable ground for hope that the downward trend in the demand for meals has been arrested.

20. As from the 1st April, 1951, the Ministry of Education increased the charges for school meals, except in the cases of Nursery Schools and Classes and Day Special Schools, from 6d. to 7d. per meal. In May, 1951, the Education Committee proposed, and the Ministry of Education approved, a revised scale of Family Incomes as the basis for the provision of free meals. The limits of family income qualifying for free meals are higher than they were before.

Quality of Meals.

21. The opening of additional Kitchen/Dining Rooms where meals are cooked and served on the premises with the consequent relief of pressure on Central Kitchens, has been an important factor in maintaining the high standard of the meals. Vigilance is constantly exercised by the School Meals Organisers to ensure that the menus are varied and balanced, that the meals are well cooked, and that the food supplied by Contractors is of the required quality and in sound condition. Immediate steps are taken to obtain replacement of commodities which are regarded as unsatisfactory.

In order that Supervisors and Cooks-in-Charge may be familiar with the qualities and cuts of meat supplied, arrangements were made with the Medical Officer of Health for practical demonstrations to be given to them by a Food Inspector at the Stanley Abattoir on the various cuts and the qualities of home killed and imported meat.

Milk.

22. Milk for drinking is provided under the Milk in Schools Scheme, free of charge, and the number of pupils taking milk in Primary, Secondary, Day Special and Nursery Schools on a day selected in each of the months February and October, 1951, were as follows:—

	1951	
	February	October.
No. of pupils taking milk ($\frac{1}{3}$ rd pint)	108,064	115,543
Percentage of pupils present supplied with milk ...	93·3%	94·9%

Prevention of Food Poisoning.

23. During the year two cases of suspected food poisoning involving minor outbreaks of sickness which were thought to have been caused by the school meal, were thoroughly investigated by the Chief Food

Inspector. He was, however, unable to form any definite opinion as to the cause of the sickness as specimens which he submitted to the City Bacteriologist did not show any evidence of infection attributable to the food.

In order to emphasise still further the importance of personal hygiene and cleanliness in the preparation and service of food, six talks on food hygiene were given during the year to Kitchen and Canteen Staffs by Doctors on the staff of the Medical Officer of Health, each talk being followed by the display of a film "Another Case of Food Poisoning".

DEFECTIVE VISION.

24. At the periodic medical examinations, other than entrants, the total number of children found to have some defect of vision was 6,216 (18·4 per cent.), of which 1,069 (3·2 per cent.) were of a minor degree and recorded for observation only. In addition, amongst the entrants 803 were found to have defective vision, mostly cases of squint.

The incidence of squint amongst the age groups inspected other than infants was 4·7 per cent., whilst that of the entrants alone was 6·0 per cent.

In addition to the cases of defective vision discovered as a result of the periodic examinations, 1,795 cases were seen as "specials".

25. The number of new cases treated under the Committee's scheme was 3,547, as compared with 3,503 during the previous year. The number re-examined at the clinics was 6,985. These numbers do not represent the total number of clinic attendances, since many children with amblyopia received intensive treatment, attending weekly, or oftener, over extended periods.

26. Previous reports have emphasised changes of a detrimental nature which have occurred in this branch of the Service since the inauguration of the National Health Service. It is interesting, however, to note that in spite of the added difficulties in the carrying on of this Service the demands made upon it have not in any way lessened.

Dr. Black, one of the Ophthalmic Surgeons, reports:—

"The work of these clinics has continued satisfactorily and there appears to be an increased spirit of co-operation on the part of the parents."

EAR, NOSE AND THROAT CONDITIONS.

27. Table 1 shows the types and numbers of cases treated at the five aural clinics.

TABLE 1.
Aural Clinics.

Number of children who attended for treatment ... 919
Total number of attendances at the clinics ... 4,431

Defect	Total	Dry or Healed	Im- proved or I.S.Q.	Exam. only No treatment given.	Still under treatment	Failed to complete treatment	Referred to Hospital or own Doctor	Referred to M.A.C. or other Clinics	Re- to I
Acute Otitis Media	19	11	—	—	—	1	7	—	
Suppurating Otitis Media ...	94	51	1	5	19	11	6	1	
Chronic Suppurating Otitis Media ...	235	68	39	—	59	42	23	4	
Mastoid Cavities	12	4	4	1	1	2	—	—	
Middle Ear Deafness with Otorrhoea	One Ear	60	5	19	2	16	8	9	1
	Both Ears	34	2	12	2	6	6	4	1
Middle Ear Deafness without Otorrhoea	One Ear	36	—	14	6	3	9	2	2
	Both Ears	179	3	105	16	22	19	7	7
Inner Ear Deafness	One Ear	7	—	6	—	—	1	—	—
	Both Ears	21	—	—	2	1	1	1	1
Otalgia and other conditions ...	98	33	6	31	8	11	4	5	
Nose and Throat conditions ...	222	11	49	39	24	40	57	2	
TOTALS ...	1,017	188	255	104	159	151	120	24	

Minor Operations ... 48
Referred to Alder Hey Hospital for Mastoid Operation ... 8

28. Since, generally speaking, otitis media (running ears) is a preventable disease, its incidence amongst school children should have a relationship to the success of any scheme of preventive medicine. In

this connection it is of interest to record that whereas in 1938 there were 2,830 cases discovered during the inspection of the school children, in 1950 this number was reduced to 1,592 and in the year under review there had been a further reduction to 1,289. In each of these three years the total numbers of children inspected were approximately the same.

As pointed out in last year's Report no doubt the credit for this degree of improvement is due to (i) the work being done at the aural clinics, (ii) the general improvement which has been occurring in the children's health, and (iii) the new anti-bacterial drugs.

29. In the reports from the Aural Clinics the question of catarrhal deafness has been prominent. This no doubt is due to the fact that the audiometry surveys are finding many such cases.

Mr. Courtenay Yorke, in writing of chronic nasal catarrh, states:—
“The causes are obscure but, contrary to the general view, in my opinion tonsils and adenoids play only a minor part. Nasal obstruction due to swollen turbinates or a deflected septum is no doubt an important factor, but home conditions and general health are certainly of great significance, and we consider advice to the parents on these matters to be of more value than local remedies.”

30. At the periodic examinations of the pupils the number referred to the Consultant with a view to the necessity of treatment for unhealthy tonsils or adenoids was 1,192, which represents 2·7 per cent. of the children examined. The number requiring to be kept under observation was 2,644 or 5·9 per cent. In addition, 333 children were presented as special cases, and of these 182 were referred for the Consultant's opinion.

31. During 1951, cases of enlarged tonsils or adenoids were treated at Rathbone Hospital and the following table shows the number of cases treated:—

TABLE 2.

Hospital.				Tonsils and Adenoids removed.	Tonsils only removed.	Adenoids only removed.	Totals.
Rathbone	...	...	...	297	252	92	641

Testing of Hearing.

32. The survey of the 8-year-old children by means of the gramophone audiometer was continued throughout the year. Of the 4,908 children tested 591 were referred to the aural clinics for further investigation and of these 80 were found to be normal, 319 to have Grade I and 192 Grade IIA deafness. Of the cases of deafness 70 per cent. were found to be due to Eustachian Catarrh, secondary in most cases to a chronic nasal infection.

33. The advising of the provision of hearing aids has been continued with due regard to earlier experience. During the year a small number of children supplied with the aids have been enabled to continue at their ordinary schools. One result which has been noted of the wearing of an aid, is a deterioration in the ability to lip-read.

34. Dr. M. Godwin carried out an investigation of 400 school children who had tonsils and/or adenoids removed. Their ages ranged from 4 to 15 years. In 69 cases tonsils only were removed, in 51 cases adenoids only, and in 280 both tonsils and adenoids. Of the 400 cases reviewed the time elapse in 116 was over 3 years, in 12 over 2 years, in 266 over 1 year, and in 6 over 6 months.

The following table lists the outstanding signs and symptoms before the operation and the resulting changes:—

TABLE 3.

Signs and Symptoms before Operation.	Number of Cases	RESULTS OF OPERATION.					
		Cured	Per- centage	Im- proved	Per- centage	No Change	Per- centage
Enlarged Cervical Glands ...	339	200	59.0	113	33.3	26	7.7
Frequent Sore Throats ...	306	221	72.2	77	25.2	8	2.6
Frequent " Colds " ...	110	72	65.5	30	27.3	8	7.2
Mouth Breathing ...	203	—	—	13	6.4	190	93.6
Hearing Defect ...	48	11	23.0	—	—	37	77.0
Suppurative Otitis Media ...	13	3	23.1	1	7.7	9	69.2
Otalgia ...	19	11	58.0	1	5.2	7	36.8
Snoring ...	68	54	79.4	7	10.3	7	10.3
Speech Defect ...	30	4	13.3	19	63.4	7	23.3
Rheumatic Pains ...	12	2	16.7	7	58.3	3	25.0
Nocturnal Enuresis ...	3	1	33.3	2	66.7	—	—

35. It will be noted that there was satisfactory improvement in Sore Throats, Colds and Snoring.

The unsatisfactory feature was the slight improvement only in Mouth Breathing, Hearing Defect, and Suppurative Otitis Media.

In the case of enlarged cervical glands "cure" means the glands were at the most just palpable whilst "no change" indicates marked enlargement. In describing a case as suffering from "frequent sore throats" the standard used was at least three severe sore throats a year accompanied by signs and symptoms of general malaise.

The cases listed as hearing defects had deafness of Grade IIA. "Cure" indicates an improvement to Grade I or better.

The cases of suppurative otitis media were chronic cases of over one year duration at the time of operation. The cases of otalgia, as far as could be ascertained, were all due to middle ear infection.

Snoring was one of the symptoms most stressed by the parents.

36. In the period between operation and the present re-examination, illnesses of note were one case of first attack of tonsillitis after removal of adenoids only, two cases of bilateral acute otitis media after tonsillectomy and one case of tubercular pleural effusion. All these illnesses began shortly following the operation.

It was noted that, of the 26 cases with enlarged cervical glands which showed no improvement, in 20 cases there was considerable tonsil tissue at the time of the re-examination.

DENTAL INSPECTION AND TREATMENT.

Report by Mr. J. A. Wood for the Senior School Dental Officer:—

37. The following Table shows the work carried out under the dental scheme for the pupils attending the Primary, Secondary Modern, Grammar and Technical Schools:—

TABLE 4.

	1948	1949	1950	1951
Number of children examined in school	120,540	68,474	51,683	41,174
Number of children requiring treatment	72,602 (60.1%)	43,936 (64.1%)	31,800 (61.5%)	26,067 (63.3%)
Number of cases accepting treatment under the Dental Scheme	44,377 (61.1%)	25,724 (58.5%)	22,006 (69.2%)	18,620 (79.1%)
Number of cases treated	40,139	25,852	20,314	17,868
Number of schools concerned ...	202	102	91	81

38. In considering the School Dental Service one can only say that the deterioration of the dental scheme has continued. The staff was further depleted by the loss of two of the whole-time officers when Mr. F. C. Littleton, who had been in the employment of the Liverpool Committee for 26 years, left to take up similar work with another Authority in May, and Mr. A. Brewer, having served for 22 years in the Liverpool dental service, died in August, to the deep regret of all who knew him. The whole-time staff was thus reduced to five officers, and at the end of the year the staff consisted of the equivalent of $6\frac{1}{2}$ officers, as compared with $9\frac{1}{2}$ at the end of 1950 and $12\frac{1}{2}$ at the end of 1948.

39. These officers face the impossible task of trying to keep the child population of this City dentally fit. This would not be an easy task with the authorised establishment of 19 officers, but with the present small staff it is not possible to do much more than attempt to preserve the flimsy structure of a dental scheme and give the greatest good to the greatest number.

For all practical purposes the staff has been forced to abandon the prevention of caries by frequent dental inspections, which should be the primary function of a dental scheme. The interval between dental inspections has now increased to an average of 26 months instead of

9 months as in 1947. This has meant of necessity that many permanent teeth which could have been saved by more frequent examinations must now be extracted, and it will be seen from the statistical table that while there has been a lamentable decline in the number of permanent teeth filled, the high level of permanent teeth extracted has been almost maintained.

40. Whilst some authorities have been forced to concentrate on emergency treatment only, it has here been felt that it were wiser to maintain the structure of the dental scheme, in the hope that an increase in staff would enable a rapid expansion to be made.

ORTHOPAEDIC SCHEME.

41. There were 972 new cases referred to the orthopaedic clinics in 1951, and 1,681 cases continued their attendances from the previous year. The children made 9,035 attendances either for examination by the surgeons or for treatment by the physiotherapists.

42. From the orthopaedic clinics 76 cases were referred to hospitals, for treatment.

Summary of Hospital Treatment, 1951.

Correction of deformities of feet or toes	...	...	33
Treatment of torticollis by operation	...	...	4
Osteotomy, arthrodesis or tarsectomy	...	...	21
Other operations	...	...	10
Other treatment	...	...	8
			<hr/>
			76
			<hr/>

43. The Child Welfare Association assisted the parents in obtaining new apparatus, surgically altered boots, repairs, etc., in 3,544 instances, whilst 6 pairs of boots for wearing with apparatus were supplied. Their visitors also made 3,377 visits to parents for reasons connected with the work.

44. The accompanying table shows, in detail, the work carried out at the clinics:—

TABLE 5.
Cases dealt with under the Orthopaedic Scheme during 1951.

Defects.	Cases seen at Surgeons' Visits.					Massage and Remedial Exercises Department.							
	No. OF CASES			No. OF ATTENDANCES		No. OF CASES.			No. OF ATTENDANCES.				
	Clinic			Clinic		Clinic.			Clinic.				
	Dingle House	Walton	Everton Road	TOTAL.	Dingle House	Walton	Everton Road	TOTAL.	Dingle House.	Walton.	Everton Road.	TOTAL.	
Infantile Paralysis	2	7	15	24	5	9	26	40	1	1	6	8	51
Birth Palsy ...	1	—	1	2	1	—	3	4	—	—	1	1	26
Spastic Paralysis	27	21	33	81	33	29	54	116	14	8	21	43	462
Rickets ...	111	202	24	337	150	241	38	429	20	27	4	51	311
Talipes ...	7	10	9	26	12	14	9	35	2	2	1	5	57
Spinal Curvature	15	26	34	75	18	41	42	101	8	16	22	46	416
Torticollis ...	9	14	11	34	12	16	18	46	4	6	8	18	85
Flat Feet ...	341	305	338	984	440	420	451	1311	77	96	100	273	1963
Other deformities	112	114	196	422	129	125	256	510	23	29	53	105	608
Other defects ...	197	259	178	634	257	325	219	801	46	79	64	189	1629
No orthopædic defect found ...	—	—	34	34	—	—	34	34	—	—	—	—	—
TOTALS ...	822	958	873	2653	1057	1220	1150	3427	195	264	280	739	5608

45. Mr. Dwyer, one of the orthopaedic surgeons to the clinics, reports that:—

“The Orthopaedic Clinics continue to be well patronised and, except in isolated instances, the patients are most regular in their attendances. This is partly attributable to the excellent accommodation provided for both examination and waiting, and in part—as has been previously mentioned—to the quiet atmosphere which enables the parent to discuss, without embarrassment or any feeling of rush, any particular problems which are worrying them.

From the Surgeons' point of view, the fact that one is able to examine a child in pleasant surroundings, not associated in any way with a hospital, does eliminate a good deal of the fear that is often present in children's minds when coming up for a special medical examination.

With the passage of time, one appreciates more and more the value of such Clinics, particularly because they provide one of the few opportunities we have of practising preventive medicine. One is able to catch potential deformities such as pes cavus and hallux valgus at an early stage and, though treatment may not cure them completely, it certainly tends to prevent the condition becoming worse, as it would inevitably do if no attention were paid to it. Preventive treatment at this stage frequently, I believe, obviates the necessity of serious bony operation at or just after adolescence.

I feel that the idea of segregating children into special Clinics should be encouraged wherever possible and that there should be a very close liaison between such Clinics and Children's Hospitals, the general trend being towards segregating children and keeping them away from hospitals concerned largely in the treatment of adults. I am convinced that the provision of suitable School Clinics such as we have in Liverpool helps enormously towards the attainment of this ideal and also in encouraging in parents' minds the idea of preventive medicine.”

MINOR AILMENTS.

46. For the purpose of organising minor ailment treatment the schools are divided into 16 groups, based upon the Authority's 13 clinics. The doctor who carries out the periodic inspection in the schools in each

group is in charge of the clinic for that group. Likewise, the school health visitors attached to each of the clinics also, as far as is possible, carry out the various school health visitors' duties in connection with their own group of schools. By organising the work in this way the doctors and school health visitors are able to make further useful contacts with those parents who bring their children to the clinics.

47. At the minor ailments clinics 34,882 cases were treated during the year. The treatment of these cases necessitated 243,082 attendances, which average 7.0 per case treated.

There were 81 cases of ringworm of the scalp as compared with 82 during the previous year. Arrangements are made with the Newsham Hospital, Belmont Road, for the treatment to be carried out. Of the 81 cases referred to this hospital 67 were treated by means of X-rays and 14 by other methods.

Of the 1,991 cases of skin conditions treated at the minor ailments clinics, 1,048 were cases of impetigo as compared with 1,153 in 1950. There was a marked decrease in the number of cases of conjunctivitis, the number treated being 725 as compared with 915 in 1950, whilst 585 children required treatment for blepharitis as compared with 709 during the previous year. There has thus been a considerable decrease in these three diseases.

48. Scabies continued its steady decline from 1,226 in 1947, to 717 in 1948, to 202 in 1949, to 114 in 1950, and 99 in 1951. All contacts were followed up, by which means 3 pre-school children and 4 adults were discovered to have scabies and were treated.

49. Of recent years painful warts on the feet, which are known as Verrucae, have become more prevalent. During 1951 a total of 438 cases of verrucae were treated at the various minor ailments clinics. This number does not represent the total number of cases, since others, the number of which is unknown, were treated elsewhere. As a precautionary measure, the Head Teachers are advised to prohibit all cases from attending the swimming baths or from using the school shower baths, and temporarily to discontinue all bare-foot dancing.

UNCLEANLINESS AND NEGLECT.

Personal Hygiene.

50. The Health Visitors made 390,270 examinations of school children with regard to cleanliness, and altogether 21,897 children were found to show some evidence of verminous infestation or were very dirty. In the case of 1,256 children, statutory notices were served upon their parents owing to their failure to cleanse their children after previous notification, and 1,106 children were cleansed by the parents and 150 had to be compulsorily cleansed by the staff.

The total number of attendances made at the cleansing stations during the year on account of verminous conditions was 12,122.

51. At the routine examinations in the schools 9·86 per cent. of the children were found to show evidence of infestation, the incidence being 5·31 per cent. in the case of boys and 14·56 per cent. in the case of girls. The results of the Health Visitors' cleanliness survey show that 17·1 per cent. of the children were found at least once during the year to be infested. The difference between the routine examination figures and the "Survey" figures is probably due to the fact that at the routine examinations the parents are notified that their children are about to be examined, but they are not notified about the survey examinations.

52. The situation in regard to cleanliness has been greatly altered during the past ten years by the bringing into use of certain new insecticides, namely Lethane, D.D.T. and Gammexane. Before the advent of these insecticides there was no substance which could safely be applied to the hair and which could be guaranteed to kill all the lice. Since these insecticides can be obtained free of charge through the National Health Service it is felt that there are now no circumstances which excuse infestation with lice.

53. Throughout the year the powers given under Section 54 of the Education Act, 1944, have been fully used. This has resulted in twelve prosecutions, involving fifteen children, of parents who have allowed their children again to become verminous after compulsorily cleansing.

54. Miss Snoddon, the Superintendent Health Visitor, in her report stresses the efforts still being made by the Health Visitors to educate parents as to the methods of ensuring their children's cleanliness. She

also comments upon the increasing number of requests from Head Teachers for the Health Visitors to give talks to the senior pupils.

55. One Health Visitor comments upon the influence of the teachers concerning the degree of cleanliness of the children. Another Health Visitor draws attention to the correlation between low mentality and verminous infestation, and suggests that the lessons in personal hygiene need to be very simple and direct.

A Health Visitor from the area in which the present scheme for dealing with infestation was first started, and in which the greatest number of prosecutions have been taken, is of the opinion that the prosecutions have had a salutary effect.

56. The fact that so many children receive insufficient sleep is a matter of real concern. In some cases the crowded housing conditions are to blame, but in the majority of cases it is due to the indifference of parents. To the usual list of reasons is now added the watching of television.

57. The School Attendance and Welfare Department has co-operated with the School Health Service in investigating cases of neglect referred to them.

Mr. Houghton, the Superintendent of the School Attendance and Welfare Department states:—

“A substantial number of cases which came to the notice of the Department alleging neglect or ill-treatment of children were referred by Health Visitors. Cases of this nature frequently require careful investigation and supervision over a long period. Legal proceedings were taken in nine cases involving sixteen children. The results of the Court actions were as follows:—

Three cases	...	...	...	Imprisonment.
Three cases	...	...	...	Probation.
One case	...	...	...	Fine.
Two cases	...	...	...	Dismissed.”

Clothing.

58. The improvement in clothing noted in last year's Report has been maintained. The most frequent adverse report relates to the lack of provision of warmer clothing for girls in the winter months. Several

of the Health Visitors comment upon the tendency, particularly in the case of the older girls, to wear light cotton frocks throughout the winter.

Footwear.

59. In recent years, attention has been drawn to the very poor condition of footwear. The reports of the Health Visitors indicate that the deterioration is continuing and that the "high cost of shoes and repairs makes it difficult to know how to advise mothers".

CHILD GUIDANCE.

60. Dr. Leveson reports:—

"During 1951 the work of the Child Guidance Centre has continued to develop. In February, Miss D. Braithwaite was appointed to carry out the duties of Psychiatric Social Worker. Until that time this post had been filled by Miss G. Foulkes, who had always been extremely conscientious and painstaking, and it is with pleasure that we record our appreciation of her work. During the year, Dr. M. C. Andrews commenced visiting the Centre regularly, and her assistance has contributed to the increased case rate over the year.

61. A total of 256 cases attended the Centre during the year for diagnosis, advice, and treatment. Of these 181 (120 boys and 61 girls) were new cases. This represents an increase of 47 new cases, as compared with 1950.

The number of attendances for treatment were:—

(a) Individual psychotherapy	...	...	422
(b) Psychotherapy Group	...	...	235
(c) Remedial Teaching	...	...	549
			<hr/> 1,206 <hr/>

Social visits to homes numbered 428 and, in addition to this, 13 visits were made to schools. There were 21 cases specially examined and reported on at the request of the Magistrates of the Juvenile Court.

62. The problems of the cases as referred have been classified as follows:—

Nervous Disorders	...	...	...	...	...	...	...	22
Fears	...	...	...	...	...	...	...	9
Seclusiveness	...	...	...	...	...	...	...	3
Depression	...	...	...	...	...	...	...	5
Excitability	...	...	...	...	...	...	...	3
Apathy	...	...	...	...	...	...	...	2
Habit Disorders and Physical Symptoms	...	...	...	...	...	...	...	36
Speech Disorders	...	...	...	...	...	...	...	7
Sleep Disorders	...	...	...	...	...	...	...	5
Nervous movements	...	...	...	...	...	...	...	7
Excretory disorders	...	...	...	...	...	...	...	15
Fits	...	...	...	...	...	...	...	1
Physical disorders	...	...	...	...	...	...	...	1
Behaviour Disorders	...	...	...	...	...	...	...	102
Unmanageable	...	...	...	...	...	...	...	21
Temper	...	...	...	...	...	...	...	13
Aggressiveness	...	...	...	...	...	...	...	10
Jealous Behaviour	...	...	...	...	...	...	...	2
Demanding attention	...	...	...	...	...	...	...	4
Stealing	...	...	...	...	...	...	...	34
Lying and Romancing	...	...	...	...	...	...	...	1
Truancy	...	...	...	...	...	...	...	14
Sex Difficulty	...	...	...	...	...	...	...	3
Psychotic Behaviour	...	...	...	...	...	...	...	2
Educational and Vocational Difficulties	...	...	...	...	...	...	...	15
Backwardness	...	...	...	...	...	...	...	14
Special disabilities	...	...	...	...	...	...	...	1
Other Cases	...	...	...	...	...	...	...	4
TOTAL								181

The age range of the new cases was as follows:—

Below 8 years of age	...	...	...	...	28
8 to 11 years of age	...	...	...	...	89
12 years of age and above	...	...	...	...	64

Of the 181 cases investigated 22 per cent. were of above average intelligence, 35 per cent. of average intelligence, and 43 per cent. of below average intelligence.

NATURE OF TREATMENT UNDERTAKEN IN CLOSED CASES.

1. Diagnosis and Advice	...	...	...	...	...	...	...	64
(a) General advice to source of reference	...	...	...	...	...	...	...	27
(b) Recommended for E.S.N. Special School	...	...	...	...	...	...	...	17
(c) Recommended for Maladjusted Special School	...	...	...	...	...	...	...	13
(d) Recommended for transfer to other Clinic or Hospital	...	...	...	...	...	...	...	7
2. Individual and Group Treatment	...	...	...	...	...	...	...	54
(a) Satisfactorily adjusted	...	...	...	...	...	...	...	26
(b) Improved	...	...	...	...	...	...	...	27
(c) Not improved	...	...	...	...	...	...	...	1
3. Withdrawn by parents before completion of treatment, or closed for lack of co-operation	...	...	...	...	...	...	...	16

63. The tendency has continued for the general intelligence of the children referred for examination to be on a low level, although somewhat higher than in the previous year. Many good results have been obtained in these children of inferior intelligence by environmental adjustment or advice to parents. The amount of social visiting has continued at a very high level and, in addition to this, parents are given the opportunity of discussing problems when they accompany children who are attending for regular treatment.

64. Educational retardation is frequently associated with emotional maladjustment, and apart from children referred to the Centre on account of their backwardness, many of the cases referred for other reasons show retardation in school work. During 1951 there was a large increase in the amount of remedial teaching given. This increase has been made possible by a wider adoption of group methods. 30 children aged between 7 and 14, with intelligence quotients ranging from 73 to 150, were given regular remedial teaching at the Centre. In all cases but one satisfactory scholastic progress was made. Quite apart from this, the children showed increased self-confidence and improved emotional adjustment both at home and at school. 18 were given remedial teaching because of a specific reading disability, 5 because of backwardness in arithmetic alone, and 7 because of general backwardness in all basic subjects. Much of this work required individual treatment, especially in the early stages, and it was after progress had been made that group methods became possible. In the case of some of the more intelligent children, very rapid improvement was recorded. For example, a girl of 10 (I.Q. 117), who, on referral, was able to do arithmetic only at the 7.5 year level, attained a level of 10 years after attending for special treatment once weekly for a period of six months. She had shown a marked sense of inferiority by her failure, and her success was accompanied by an appropriate improvement in her general self-confidence. A boy aged 8 (I.Q. 105), made 18 months' progress in reading after attending the Centre for a period of only four months.

Each child taken on for remedial teaching attends at least once weekly. It will be seen that a considerable amount of time is devoted to this work, and it has been found necessary to form a waiting list for such teaching. The part-time help of a teacher who was interested in this work would greatly facilitate its extension.

65. There has been an increase in the number of cases referred by the Magistrates of the Juvenile Court, and much liaison between the Centre and Probation Officers and Officers of the Children's Department.

66. The close liaison between the Child Guidance Centre and Aymestry Court Special School for Maladjusted Children has continued. Dr. Leveson and Mr. Chazan have attended at the school, whilst Miss Braithwaite has, on occasions, made many social visits to the homes of boys who live locally. The follow-up of discharged boys has continued at the Centre. The reduced facilities at Aymestry Court for recreation and leisure occupation are a cause of increasing concern. The adjoining land has now been built on and some of the greenhouses have been dismantled on account of their dilapidation. This, together with the lack of facilities for the more robust and noisy play, is making the building and its amenities much less suitable. Recreational facilities for outdoor occupations play a very important part in the readjustment of many of those children who require treatment in a residential school. If the projected new road is ever made the school will become almost completely devoid of spare ground.

67. Further equipment has been obtained for the play room and remedial teaching at the Centre, fulfilling a real need.

68. We again express our thanks to the Chief Assistant School Medical Officer and his staff for their co-operation and ever-ready advice."

69. Some cases requiring Child Guidance Clinic treatment are referred to the Notre Dame Child Guidance Clinic, and during the year 38 cases were referred. The Director of the Notre Dame Child Guidance Clinic reports as follows:—

"During 1951 the work at Notre Dame Child Guidance Clinic has continued on the same lines as in previous years. In all, 293 children have attended, 240 of these being new cases.

The classification of children according to age and intelligence shows no significant difference from last year. In the classification according to the type of problem for which children are referred, there appears an encouraging tendency towards an interest in the less aggressive manifestations of maladjustment, in that rather a larger proportion than in the last two or three years have been referred for nervous and personality disorders.

The increasing number of children treated as distinct from those who receive only diagnosis and advice makes very heavy work for the Psychiatric Social Worker, as so much depends on regular contact with parents and guardian. In 1951 the number of psychiatric social work interviews mounted up to 1,337. It was, therefore, decided at the end of the year to appoint an Assistant Social Worker.

70. Remedial teaching has been provided for 25 children during the year and they have made 1,271 attendances for this purpose. We are fortunate in having acquired the services of an experienced teacher who works in close collaboration with one of our educational psychologists. The children concerned are either referred to us as of average intelligence with a severe reading disability or are sent here for other reasons but found to be practically illiterate. In almost every case, these children give evidence of maladjustment usually related either as cause or effect to their school failure. The intelligence of this group ranges from I.Q. 115—70. A matter for concern is the age at which they reach us. Of the 25 children only 7 were under ten years old and 8 were over twelve. A normally intelligent child who comes to the last year of the junior school or goes through the secondary modern without learning to read, has usually sunk into a condition of discouragement or apathy or taken refuge in aggressive behaviour to an extent that adds considerably to the problem.

71. Of the 203 cases closed by the end of the year 92 were considered adjusted or very much improved and 40 had been withdrawn by

parents or closed for lack of co-operation, 9 were transferred to Residential Schools or Institutions and 4 were closed unimproved; while 58 had attended only for diagnosis and advice."

TUBERCULOSIS.

72. As a result of examinations made by the school medical officers, 234 school children were referred to the Tuberculosis Officers for investigation. The Tuberculosis Department also supplied reports upon 677 pupils who had been reported from various sources as possible cases of tuberculosis.

Dr. J. A. Rushworth, the Assistant Senior Medical Officer (Tub.), supplied the following tabulated statistics relating to the number of notifications of cases of tuberculosis and deaths from that disease at five-year intervals since the year 1928, as well as the figures for 1951.

The table shows a slight rise in the incidence of the disease compared with 1948, though there is a marked decrease in the number of deaths.

TABLE 6.

Tuberculosis (Notifications), School Children (5-15 Years).

		1951	1948	1943	1938	1933	1928
Males	{ Respiratory	46	36	34	59	126	215
	{ Non-Respiratory ...	26	33	59	55	135	122
Females	{ Respiratory	55	43	30	58	136	192
	{ Non-Respiratory ...	21	16	48	63	131	122
TOTAL		148	128	171	235	528	651

DEATHS.

		1951	1948	1943	1938	1933	1928
Males	{ Respiratory	—	2	4	3	10	12
	{ Non-Respiratory ...	1	9	10	5	17	19
Females	{ Respiratory	2	6	5	8	21	25
	{ Non-Respiratory ...	4	7	7	6	16	22
TOTAL		7	24	26	22	64	78

MISCELLANEOUS ITEMS.

(a) Infectious Diseases in Schools.

73. There were 4,084 cases of infectious diseases in school children reported to the Public Health Department during the year 1951, this being a decrease of 212 cases as compared with the previous year, the decrease being chiefly in cases of scarlet fever and whooping cough. The downward trend in the number of cases of diphtheria, previously referred to, still continues; 46 notified cases, as against 109 cases for the previous year, being reported. Scarlet fever also showed a decrease of 262 cases, measles an increase of 339 cases and whooping cough a decrease of 241 cases. There was a slight decrease in regard to mumps (21 cases) and an increase in chickenpox (31 cases).

It was not necessary to close any school or department on account of infectious disease during the year.

The arrangements made in previous years, for the inoculation against diphtheria of children attending the schools, were continued. Visits were paid to 74 primary schools, 18 mixed schools (junior and senior combined), 5 secondary modern schools and 2 grammar schools, a total of 2,941 children being inoculated and 3,486 previously inoculated children received reinforcing injections. In addition, a number of children of school age were inoculated at the various immunisation clinics held throughout the City, while an increasing number of children are being inoculated by their own doctors.

The proportion of children aged 5-15 years inoculated at the end of 1951 was 79·6 per cent. The accompanying Table is of interest. It shows, for a succession of years, the number of cases of diphtheria and deaths therefrom in children of 5-15 years both amongst inoculated and non-inoculated children as well as the marked reduction in the incidence of cases of diphtheria. This reduced incidence, it will be noted, has been most marked since 1943 when the percentage of immunised children had progressed past the 50 per cent figure.

TABLE 7.

Diphtheria Immunisation in Liverpool.

CASES AND DEATHS IN INOCULATED AND NON-INOCULATED CHILDREN IN
LIVERPOOL AT AGES 5—15 YEARS.

Year.	No. of Cases.		No. of Deaths.		Total accumulation of inoculated children 5-15 at the end of the year.
	Non-inoculated.	Inoculated.	Non-inoculated.	Inoculated.	
1932	1,852	11	90	—	—
1933	1,658	20	85	1	—
1934	1,622	37	90	—	—
1935	1,526	51	75	3	—
1936	1,218	51	76	1	—
1937	1,382	75	76	2	—
1938	1,270	83	68	2	—
1939	763	53	44	—	—
1940	1,107	49	61	—	—
1941	1,513	74	89	1	51,625
1942	1,328	87	53	—	64,582
1943	623	52	11	—	79,578
1944	375	37	12	1	80,951
1945	358	53	12	—	84,031
1946	241	28	5	—	89,600
1947	167	22	3	1	92,481
1948	123	6	2	—	97,193
1949	51	2	—	—	98,751
1950	22	1	1	—	100,905
1951	9	—	—	—	100,865

(b) Vaccination.

74. The percentage of unvaccinated children amongst those examined at the periodic examinations in 1951 was 35·3.

When medical inspection of school children was inaugurated in 1909 the percentage of unvaccinated children was 6·1. From then onwards a progressive increase in the percentage of unvaccinated children took place until 1945 when for the following two years some improvement was noticed. The present percentage of unvaccinated, however, is the highest recorded.

The percentages for the years under consideration were:—

In 1909	the percentage was	6·1
„ 1915	„ „	7·1
„ 1920	„ „	not available
„ 1925	„ „	16·3
„ 1930	„ „	19·1
„ 1935	„ „	22·7
„ 1940	„ „	23·4
„ 1945	„ „	31·0
„ 1950	„ „	34·8
„ 1951	„ „	35·3

(c) Employment of Pupils.

75. During the year a total of 3,404 children were engaged in part-time employment. The school medical officers examined 1,443 children as to their fitness to undertake work and in 2 cases the undertaking of this part-time work was not recommended on medical grounds. Legal proceedings in respect of illegal employment of school children and contravention of the Bye-laws were taken in 4 cases.

Street Trading by persons under the age of 18 is now prohibited in Liverpool by Bye-laws which came into operation in April, 1948. Legal proceedings in respect of illegal street trading were taken in 6 cases.

The officers of the School Attendance and Welfare Department continue to supervise all children who take part or are employed in entertainments. During the year, 90 new Licences were granted and 10 Licences were renewed. In all cases the children were examined by the school medical officers to ascertain if the employment would be prejudicial to their health and education. In one case it was recommended that the application be refused on medical grounds.

(d) Children and Young Persons Act.

76. In accordance with the provisions of the Children and Young Persons Act, 1933, medical reports for the information of the Magistrates in the Juvenile Courts at Liverpool and elsewhere were submitted in 3,328 cases.

The Magistrates asked for special medical examinations to be carried out by the Education Authority in 124 cases for the following reasons:—

Ascertainment of Mental Ability	...	...	...	81
Maladjustment	...	...	...	17
Other	...	...	...	26
				<hr/>
				124
				<hr/>

(e) School Premises.

77. The City Engineer and Surveyor reports the following alterations and improvements which were carried out on school premises:—

Sanitary Improvements	...	...	...	...	...	32 schools
Playground repairs	...	...	...	...	...	15 „
Improvements and repairs to heating installations, etc.	...	...	...	...	...	13 „
New heating boilers	...	...	...	...	...	12 „
Miscellaneous improvements, e.g., classrooms, cloakrooms, windows, floor coverings, etc.	...	...	...	...	...	24 „

The City Architect also reports that work has been completed on the modernisation of the sanitary accommodation at the following schools: Clint Road, Major Lester, Newsham (Boaler Street), Tiber Street and Webster Road.

Work is in progress at the following schools: Beaufort Street and Rathbone.

NURSERY SCHOOLS AND CLASSES.

78. The economic and housing conditions obtaining in the City, together with a wider parental knowledge of the needs of children, are largely instrumental in maintaining the steady demand for nursery school and nursery class accommodation. The increased call for accommodation for children of statutory age, however, has made it necessary for the Education Committee to close the second Nursery Class in Stockton Wood Road, Speke. There is, therefore, no provision for children of 2 to 5 years of age in the Speke area. The Nursery Class at Northway School and one at Prince Rupert (Steers Street) School have also had to be discontinued owing to pressure on Infants' accommodation.

There are now 32 nursery classes in 24 Infant Schools with a total of 1,057 children on roll.

The Nursery School at Stanley House, catering for 40 children, was opened in June, 1951. There are now 7 nursery schools accommodating some 499 children.

79. The nursery schools cater for children between the ages of 2 and 5 years and, as in the case of nursery classes, the waiting lists are long. Continual applications are being made for admission.

80. There are 34 qualified teachers at present serving in nursery schools and nursery classes together with 14 wardens. Some of the nursery assistants who have completed their National Nursery Certificate course have proceeded into hospitals for further training and some to posts in private homes. There are, at present, 24 students attending the

Mabel Fletcher Technical College on two days in each week preparing for the National Nursery Certificate Examination. A number of students completed the Certificate during 1951.

81. Contact with the homes is maintained by the Teachers-in-Charge of the nursery schools by means of meetings of Mothers' Clubs and through the welcome mothers receive whenever they bring their children to school. Parents are encouraged to look upon nursery school life as an extension of the home life of the children.

82. There is a very keen sense of co-operation between the staffs of the nursery schools and the school and welfare nurses. This provides for a much wider knowledge of the children's physical well-being and often of the home conditions of the children. It is an important factor in the organisation of nursery schools and classes.

83. During the year, 7 nursery schools and 32 nursery classes in 24 Infants' Schools were inspected from time to time by the School Medical Officers, who carried out a periodic medical inspection of 1,153 of the children attending these schools and classes during the year. Of the children so examined 754 were found to be vaccinated, while 399 children showed no evidence of vaccination. 479 children were found to have been immunised.

The General Condition of these children was assessed as follows:—

Pupils Inspected.	General Condition.		
	Good.	Fair.	Poor.
1,153	552	594	7

The School Medical Officers also carried out 278 re-inspection examinations of pupils found to have defects. In addition, 91 special examinations were made of children brought forward by the Teachers-in-Charge.

All the Committee's schemes of treatment are available for nursery school children.

The defects found at all the inspections are shown in Table 8.

TABLE 8.

Defect or Disease.								Requiring Treatment.	For Observation.
SKIN	...	...	...	...	Scabies			—	—
					Impetigo			2	—
					Others			3	16
EYES	...	...	...	...	Blepharitis			1	5
					Conjunctivitis			1	3
					Others			3	1
					Vision (wearing glasses)			—	2
					Squint (new cases)			36	25
					Squint (wearing glasses)			3	21
EARS	...	...	...	...	Hearing			1	4
					Otitis Media			6	26
					Others			1	9
NOSE AND THROAT	...	...	...	...	Tonsils			16	73
					Adenoids			8	11
					T. and A.			10	12
					Others			4	31
					Cervical glands			1	27
SPEECH	...	...	...	...	Stammer			—	4
					Others			2	10
HEART AND CIRCULATION	...	...	...	...	Congenital			—	6
					Others			—	21
LUNGS	...	...	...	...	Pulmonary T.B.			1	20
					Bronchitis			5	51
					Others			—	46
DEVELOPMENTAL	...	...	...	...	Hernia			1	10
					Others			—	38
ORTHOPAEDIC	...	...	...	...	Posture			1	3
					Flat Foot			12	21
					Others			20	32
NERVOUS SYSTEM	...	...	...	...	Epilepsy			—	1
					Others			—	6
PSYCHOLOGICAL	...	...	...	...	Development			1	5
					Stability			—	6
RHEUMATISM	...	...	...	...	Chorea			—	1
NON-PULMONARY T.B.	...	...	...	...	Glands			—	1
					Bones and Joints			—	1
OTHER DISEASES AND DEFECTS...	...	...	...	...	Debility			7	22
					Anaemia			1	6
					Others			3	42

HANDICAPPED PUPILS.

Blind Pupils.

84. Liverpool blind children are accommodated in various schools, as shown in the table below, since no Special School is maintained by the Authority:—

Wavertree School for the Blind	...	...	...	...	5
St. Vincent's R.C., School for the Blind, West Derby	...				3
Sunshine Homes	...	...	...	...	4
Henshaw's School for the Blind, Manchester	...	...			7
Worcester College	...	...	...	...	1
Condoover Hall Blind Special School	...	...	...		2
Chorleywood College	...	...	...	...	2
					<hr/> 24 <hr/>

Partially Sighted.

85. Classes for partially sighted pupils were held in the following centres:—St. Anne's C.E. School, Christian Street, Underlea Day Open-Air School and Fazakerley Day Open-Air School. The number on rolls at these classes at the end of the year was 57.

Dr. Black, one of the Committee's Oculists, has continued his supervision of these children by making regular examinations both at the schools and at the Defective Vision Clinics. He has also continued his practice of giving informal talks to the teachers of the partially sighted classes.

In his report, Dr. Black refers to the wide age range in these classes and expresses the opinion that much more could be accomplished if the four classes were in one school and so result in better grading of the children.

Deaf and Partially Deaf.

86. At the end of the year 1951 there were 139 deaf children and 51 partially deaf pupils attending Crown Street School for the Deaf, of whom 102 deaf and 44 partially deaf were Liverpool children. There were also 14 deaf children attending deaf schools maintained by voluntary managers.

The number of children awaiting admission to the School for the Deaf was 2.

87. Mr. Newport, the Headmaster, reports that:—

“During the year the three new table hearing aids mentioned in last year’s report have been brought into use and are proving a great asset to the teachers in developing the Oral method of instruction.

Two classrooms have now been treated accoustically with special sound absorbing tiles. This treatment of a room helps to cut down reverberation and extraneous noises, so that more efficient use can be made of the hearing aids.

The School Health Service and the Deafness Clinic are co-operating with us to ensure that all children who are capable of gaining benefit from the use of a Medresco individual aid, will be supplied with one. Children who are given listening practice and trained in the use of their aid should find that it is of great help to them during their school career and throughout life.

A portable radiogram has been a welcome addition to the school apparatus. It is being used with the partially hearing children for listening practice and for rhythmic work, as well as for folk dancing.

Throughout the year children have made visits to places of educational interest, such as the docks, the overhead railway, the transporter bridge, an aerodrome and a farm.

Great use has been made of the visual aids, which include film and strip projectors. Among the many films shown have been several dealing especially with the training and achievements of deaf children, and these have been seen by the children and the staff.

With the help of members of our active Parent-Teacher Association, together with other day school staff, hostel staff and friends, we have again held many social events to raise money for extra treats and comforts for the children. We are proud to say that since September, 1948, we have raised £1,000 for our Children’s Fund, all of which is being spent on the children.

A television set of the projection type has been set up in the small playroom, and is a very popular instrument. Many of the programmes are welcomed, and of particular benefit to the deaf are the programmes of outside events, which show the children what is happening in the world around them.”

Epileptic Pupils.

88. The Committee has no residential school for epileptic pupils. The 33 epileptic pupils at the end of the year were placed as follows:—

Maghull Home for Epileptics	5
Colthurst School for Epileptics... ..	8
Other types of Special Schools... ..	12
Awaiting admission to Epileptic Schools	6
Recommended for home teaching	2
	<hr/>
	33
	<hr/>

Delicate Pupils.

89. The number of delicate pupils on the rolls of each of the three day open-air schools at the end of the year was as follows:—

Fazakerley Open-Air School	216
Underlea Open-Air School	164
Margaret Beavan Open-Air School	40

90. Miss A. Tunncliffe, the Head Teacher of the Fazakerley Open-Air School reports:—

“At present there are 227 children in eight classes in the Open-Air section with an age range of 5 years to 16 years. In addition there are 19 partially-sighted children and 9 physically handicapped children divided into two classes according to age and attainment.

Of the children who have been withdrawn 49 have been discharged to attend ordinary schools, 8 partially sighted and 13 open-air pupils have left to start work, and 21 children have been transferred to schools more suited to their disabilities. The latter arrangement was made possible by some re-organisation of transport.

Ten children, eight T.B. contacts and 2 asthma cases, are in Switzerland and their letters testify to the mental and physical benefit which they are deriving from their visit.

Many of the children in the school are in need of special tuition, especially in reading. A plan is in operation to meet this need, as it is thought that the sense of inferiority attendant upon illiteracy has a detrimental effect upon the whole well-being of the child. It is regretted that the poor educational attainments level is aggravated by the low attendance (average for the year—approximately 73 per cent.), which is usually but not always inevitable.”

91. Miss G. M. Robertson, the Head Teacher of Underlea Special School, reports:—

“On March 5th, 1951, Underlea had its twenty-first birthday, and during the 21 years about 2,000 open-air children and 100 partially sighted have been on the rolls of the school.

During the last year ‘postural drainage’ has been introduced into the school for the first time, and about half-a-dozen bronchiectasis children practise it daily. It is early yet to assess the value of it. There has been marked success in the case of one boy who has had lobectomy and postural drainage; from a dull, lethargic boy he has developed into an active, intelligent child.

A number of children left in the fall of the year, six for Switzerland and about six for Abbots Lea. One girl has returned from Abbots Lea having gained 11 lbs. in 3 months—a recommendation for the school.

The good work by the pupils and staff of the Barkhill Physical Training College continues. They not only take special remedial exercises but general P.T. with all the girls once a week. Their efforts on our behalf are much appreciated.”

Physically Handicapped.

92. At the end of the year, 122 children were in Hospital Schools, 115 at Alder Hey Hospital and 7 at Olive Mount Hospital. The physically handicapped pupils in attendance at day special schools numbered 245 at the year's end, and these pupils were placed as follows:—

Margaret Beavan	...	...	...	...	124
Dingle Lane	...	...	...	...	112
Fazakerley	...	...	...	...	9
Underlea	...	...	...	...	—
					<hr/>
					245
					<hr/>

93. Mr. O. Roberts, the Head Teacher of the Margaret Beaven Open-Air School, writes:—

“Where permitted by the School Medical Officer, swimming instruction is given to boys and girls. During the year eight children gained proficiency certificates. Although keen competitive games have no

place in our activities, friendly games are played with schools in the immediate neighbourhood. The boys enjoyed a very successful football season, winning seven games out of eight. A very enjoyable week's holiday was spent in July. Fourteen boys and twelve girls, accompanied by six members of the staff, including the school nurse, spent the week at a Youth Hostel in North Wales.

The After-Care Committee functions with zeal and enthusiasm. Meetings are held at school every term and the welfare of the children discussed in detail. The Old Scholars' Party was held on Wednesday, 17th January. Sixty-three boys and girls enjoyed a very pleasant evening. A good number of old scholars are members of the Phoenix Social Club for Physically Handicapped."

94. Miss K. M. Lewendon, the Head Teacher of the Dingle Lane Special School, writes:—

"In January, 1951, we removed from Windsor Street to more suitable and spacious premises in Dingle Lane. Here the children are fortunate in having well equipped Handicraft and Housecraft Rooms, a Needlework Room and a Library.

I am pleased to be able to report that a number of the orthopaedic cases are receiving treatment regularly at the Dingle House Orthopaedic Clinic, where they are also seen periodically by Specialists.

Arrangements have also been made for those children who have been transferred to us from the Greenbank Rest School of Recovery to attend there regularly as out-patients. Other satisfactory arrangements have been made for individual children to visit Hospitals for special treatment.

During the year ten children have left school to take up employment and nine have been fit to be transferred to Primary or Secondary Schools.

The general health of the children has been good."

95. Mrs. H. Stopforth, Head Teacher of the Liverpool Children's Rest School of Recovery, writes:—

“Fourteen children have left during the year; two of these to take up employment, whilst it is hoped that another will manage to manipulate a loom at home. The remaining eleven were deemed fit to return to Primary Schools and Day Schools for the Physically Handicapped.

The general health of the children has been good and it is especially gratifying to see the improvement in the children suffering from coeliac disease.

Senior Students from the Liverpool School of Physiotherapy visit the Spastic Unit at stated times to study methods of treatment in use.

A Speech Therapist now visits the Unit.

Most of the children show steady progress which, though slow, is very satisfactory to all the staff concerned.”

Pupils Suffering from Cerebral Palsy.

96. At present in Liverpool, between the ages of 2 and 16, there are 151 cases of Cerebral Palsy. 31 cases have been notified to the Local Mental Health Authority as ineducable under Section 57 (3) of the Education Act, 1944. 10 children are below compulsory school age but the parents of these children are asked to take them to the Spastic Unit at the Greenbank School as out-patients. They attend individually once a week but as the mother learns from the Physiotherapist the principles of treatment she accordingly carries this out at home and reduces the frequency of attendances at the school.

97. The remaining 110 children attend school and the following table shows the distribution of each type of handicap and the average Intelligence Quotient for each group:—

Type.	NO. OF CASES.			INTELLIGENCE QUOTIENT.	
	Boys.	Girls.	Total.	Range.	Average.
Athetoids 	11	6	17	50-120	87
Paraplegia 	8	13	21	50-110	83
Hemiplegia 	33	22	55	50-100	85
Quadriplegia 	9	8	17	40-80	70
	61	49	110		

Of these 110 children 46 are so slightly handicapped and are making such satisfactory progress academically that they attend ordinary schools. They are examined roughly every six months by the School Medical Officer, and the Educational Psychologist visits the schools from time to time to check their scholastic progress.

32 of the children are so handicapped that they have been recommended for attendance at day schools for physically handicapped pupils since it was considered by the selection panel at the Spastic Unit that they were not in need of residential treatment. These cases are visited weekly by the Physiotherapist, when she advises the School Nurse on the treatment required. The Educational Psychologist also visits periodically to follow up their educational progress.

15 cases are accommodated in the residential Spastic Unit at the Greenbank School. The remaining 17 spastic children, on account of their relatively severe mental handicap and poor educational attainments, attend special schools for educationally sub-normal pupils.

98. The following table indicates the numbers of children attending the various types of school with the average Intelligence Quotient in each group :—

School.	Children.	INTELLIGENCE QUOTIENT.	
		Range.	Average.
Ordinary	46	70-120	93
Day School for Physically Handicapped ...	32	50-100	82
Educationally sub-normal	17	40-80	63
Spastic Unit	15	60-100	80

99. The accompanying return shows the results of the examinations made by the approved medical officers of children referred with various physical handicaps :—

Delicate and Physically Handicapped Pupils.

Recommended for day open-air school	...	...	...	...	...	...	...	155
Recommended for residential open-air school	...	...	...	...	...	...	...	20
Recommended for day special schools for physically handicapped pupils	...	...	...	...	...	...	...	73
Recommended for boarding special school for physically handicapped pupils	...	...	...	...	...	...	...	14
Unfit for any school	...	...	...	...	...	...	...	7
Recommended for home teaching	...	...	...	...	...	...	...	7
Decision postponed	...	...	...	...	...	...	...	17
Referred to hospital	...	...	...	...	...	...	...	1
Remain in ordinary school	...	...	...	...	...	...	...	112

Epileptic Pupils.

Recommended for boarding special school for epileptics	6
--	-----	-----	-----	-----	-----	-----	-----	---

EDUCATIONALLY SUB-NORMAL PUPILS.

100. The Authority has four boarding schools for educationally sub-normal pupils (two schools for boys and two for girls) with accommodation as follows:—

Crookhey Hall, near Lancaster, for Senior Boys	...	...	...	...	...	72
Hightown School, Hightown, for Boys	...	...	...	...	...	60
Knotty Ash, for Girls	...	...	...	...	...	40
Oakfield, Gateacre, for Girls	...	...	...	...	...	30

101. The Authority also maintained 15 educationally sub-normal pupils at other boarding schools, 7 at Pontville Roman Catholic Special School, 6 at Allerton Priory Roman Catholic Special School and 2 at Besford Court Roman Catholic Special School, Worcestershire.

102. There are six day special schools and two special classes for educationally sub-normal pupils with accommodation for 840 pupils. The schools are Queensland Street, Northumberland Street, Richmond, Kilrea Road, Clubmoor (Abingdon Road and Higher Lane Extension), and Stonycroft, whilst the classes are at Banks Road and Grant Road Schools.

103. Miss Travis, the Headmistress of Crookhey Hall School, writes:—

“ During the past year a good standard of work has been maintained. In proof of this, eight boys were transferred back to the ordinary schools before reaching the age limit. It is interesting to note that most of these boys had been resident at Crookhey for a period of three to four years.

The most striking development of the year has been the expansion of social contacts outside of the School. In July the Cadets brought back the Silver Cup awarded to them for being the smartest unit in a camp

of over 1,000 West Lancashire boys; this surely is the answer to those who ask 'Is residential life for these educationally sub-normal children worth while?' From this, outside interest started to move, and the boys now receive two visits a week from an ex-Champion Lightweight Boxer. Excitement was intense at Preston where the school saw three of their Cadets win the Eliminating Rounds for the County Cup. These three boys, together with two others who each had a 'walkover', were awarded Silver and Bronze Medals at the Final in Liverpool on January 5th, 1952. Three Cadets are competing in Manchester at a later date. Football matches with outside teams have been enjoyed, and the spirit of the school is excellent.

The Rotary Club have included Crookhey on their list, and each month a troupe of Nigger Minstrels or children from a School of Dancing have entertained the boys. The deportment of the boys on these occasions is beyond words. Looking back, one would say 'Are these really the children we admitted two years ago?' The old sense of inferiority is unknown now.

The prospects for these boys are of great interest to us all, and at Easter, with the permission of the Education Committee, a three-day Reunion was held. Approximately twenty boys returned, all looking prosperous and happy—many who had low I.Q.s were in constant work over periods of years. Boys who remained on local farms were obviously wealthy young farmers and the envy of many of the City youths, who promptly enquired of them 'Were there any vacancies?' "

104. The results of the examinations made by the Approved Officers of children referred for ascertainment as being educationally sub-normal pupils are as follows:—

Educationally Sub-Normal Pupils.

Recommended for day special school	...	...	...	...	...	...	...	390
Recommended for boarding special school	...	...	...	...	...	...	...	78
Recommended for special educational treatment in ordinary school	...	...	...	...	...	...	...	157
Examined and found to be mentally normal	...	...	...	...	...	...	...	17
Decision deferred	...	...	...	...	...	...	...	28
Referred to Child Guidance Clinic	...	...	...	...	...	...	...	22
Recommended for admission to boarding special school for maladjusted pupils	...	...	...	...	...	...	...	13
Recommended for notification to the Local Mental Deficiency Acts Authority—								
(a) for supervision 57(5)	...	...	...	...	...	...	...	84
(b) as ineducable 57(3)	...	...	...	...	...	...	...	71
(c) as inexpedient 57(4)	...	...	...	...	...	...	...	1

Maladjusted Pupils.

105. There were 30 boys in the Aymestry Court Residential School for Maladjusted Boys and, of these, 10 boys were from the areas of other Education Authorities. The arrangements for the remedial care of these children remain as described in last year's Report.

Speech Therapy.

106. The Committee were successful in obtaining the services of Mr. W. G. Good, L.C.S.T., as Senior Speech Therapist, in September, 1951; between September 10th and the end of the year treatment was given to 75 children as follows:—

			Boys.	Girls.	Total.
Stammering ...	...	...	39	11	50
Speech Defect ...	...	...	8	8	16
Cleft-Palate ...	...	...	1	3	4
Rhinolalia ...	...	...	2	3	5
TOTALS ...	...	...	50	25	75

Medical and Dental Arrangements.

107. The routine medical examinations and the general medical care of the special schools outside Liverpool is carried out by local medical practitioners, whilst specialist and dental treatment is provided either under the Local Authorities' arrangements or, in a few instances, by special arrangements made in the areas.

All the medical and dental facilities of the School Health Service are available for the special school children.

Medical treatment under the Authority's schemes was carried out as follows:—

Defective Vision	...	...	...	...	...	...	175
Tonsils and Adenoids	...	...	...	...	...	..	34
Aural conditions	...	...	...	...	...	...	28

whilst children suffering from minor ailments were treated at the schools.

108. The following table shows the work carried out by the dental staff of the School Health Service at the Special and Approved Schools:—

TABLE 9.

	Special Schools.	* Approved Schools.
Number of inspection sessions	8	2
Number of treatment sessions	11	6
Total number of sessions	19	8
Number of children inspected	576	103
Number of children requiring treatment	350 (60·7%)	43 (41·7%)
Number of children treated	205	43
Number of attendances made for treatment	226	43
Number of teeth extracted	390	26
Number of teeth filled	14	19
Number of other operations	17	5
Number of administrations of general anaesthetics	186	22

* On behalf of the Children's Committee.

EMPLOYMENT OF HANDICAPPED PUPILS.

The following is extracted from the Report of the Youth Employment Service for the year 1951:—

109. "In Liverpool the service available at the Bureau for the handicapped has expanded to such an extent, and is now so widely known by Head Teachers, Doctors, Almoners, Personnel Officers and others, that it can unhesitatingly be said hardly a single young person capable of being assisted fails to make contact with the Special Section within a few days of leaving school or becoming available for work.

During the year under review six hundred and eighteen handicapped boys and girls applied for advice and assistance, of whom 366 were boys and 252 were girls. Three hundred and sixty of these young people had attended Liverpool Special Schools. Of the 618 young people, 350 were physically handicapped or delicate boys and girls; 255 were educationally sub-normal, while the remaining 13 were maladjusted or had psychological problems. They had a wide range of handicaps varying from asthma to osteomyelitis, from deafness to tuberculosis.”

110. Describing the difficulty of placing epileptic boys and girls in employment, the Report states:—“Where, however, the employer, by his understanding and sympathetic attitude, creates an atmosphere free from strain, it is usually found that not only do the attacks gradually become reduced in frequency but the young person’s health and outlook improve greatly as a result of interesting employment and congenial surroundings. Of the seventeen boys and girls with this weakness who have been dealt with during the period, sixteen (ranging from very mild to quite severe cases) have been placed in the following types of employment, viz., gardening, office work, shop work, kitchen assistant, factory work and warehouse assistant.

111. It has been said in connection with the physically handicapped—and it applies also in a large measure to those who are mentally sub-normal—that ‘If a person has not found some channel in which he can be of service he will never be able to offer any return for being helped and so will acquire a terrible feeling of inferiority’. Notwithstanding the appreciable amount of unemployment on Merseyside, not only amongst adults but also amongst adolescents, it is gratifying to be able to record, therefore, that by special efforts during the twelve months no fewer than 644 posts were filled by handicapped young people of whom 387 were boys and 257 girls. Not only did these placings cover a wide range of work but many of the jobs were of good quality and offered the opportunity for a progressive career. For instance, fifty-three boys were placed as apprentices, thirty-one as clerical or shop-workers, one hundred and eight were in factories where, although the work may be of a repetitive nature, it is being carried out also by non-handicapped boys. Of the girls, forty-two were placed in clerical or shop work, twenty-five to the needle trades and one hundred and thirty-two in various types of factories.

112. The co-operation which has so long been given by the Heads of all the Special Schools, the Chief Assistant School Medical Officer and his staff, has been closely maintained during the period under review. The successful start in life by the handicapped can result only from the combined efforts of the Medical, Teaching and Vocational Guidance staff. The teachers, who regularly see the pupils daily during a period of years, are able to make assessments of aptitude and ability, the Medical Officers by their expert knowledge of the limitations imposed by the complaint at the present time, and its probable development, are ever ready to place their knowledge at the disposal of the Specialist Officer when the conference with the parent and the child takes place in the school. It is thus possible from the beginning to arrive at sound conclusions regarding the best form of employment for the handicapped child and to take steps to obtain suitable employment for him. The practice is now being introduced, as far as practicable, of the Vocational Guidance Officer attending twice at each school to interview leavers. On the first occasion the boys and girls are each seen privately in order that they may have an opportunity of discussing freely and fully their interests and aspirations, thus affording the Officer better opportunities of making assessments of personal qualities. The second interview with the child is carried out a few days later at which the Head Teacher, the School Medical Officer and the parent are present with the Vocational Guidance Officer so that the final advice given can be based on this joint consultation concerning the child's abilities, attainments, temperament and physical condition as well as the desires of the child and the wishes of the parent.

113. The greatest care is exercised in selecting the employment for handicapped boys and girls in order to ensure that the work is unlikely to place too heavy a strain on either their physical or mental powers. For this reason it is often found desirable to visit the premises of employers both to study the exact nature of the work carried out and the conditions under which it is performed. Similarly, employers are visited in order to discuss particular boys and girls with them or to seek their interest and co-operation on behalf of individual handicapped young people. Indeed, it is often necessary to approach several firms before an opening is found which offers just the conditions which will suit the handicap of the particular boy or girl. During the period

under review one hundred and seven such visits were made, and it is gratifying to be able to record that in every case the officers concerned have been received in a most encouraging manner by the representatives of employers who, although they may not always have been able at the time to provide an opening for one of the handicapped, have displayed interest and a desire to co-operate in the large majority of instances.

114. Particular attention is also given to maintaining close supervision of the progress at work of the handicapped who are in employment. Approximately two months after they have commenced employment boys and girls are invited to attend at the Bureau, which remains open one evening every week in order that they may have the opportunity of calling to discuss the suitability of their situation or any other problem about which they need advice. Many avail themselves of this facility but those who fail to do so, because of distance, inclement weather or other causes, are visited in their own homes. Home visitation is found to be a particularly valuable method of maintaining contact because it provides opportunities for establishing friendly relationships with those parents who, because of work or domestic duties, were unable to attend the interview at school or subsequent interviews at the Bureau. All too frequently during a young person's first few weeks in employment small dissatisfactions arise, owing to misunderstandings, that can easily be dispelled by the trained Vocational Guidance Officer. Such difficulties can be removed even more effectively if the position can also be explained to the parent and the co-operation of the people at home secured. During the year under review visits were paid to the homes of two hundred and thirty-eight young people. Other valuable methods of maintaining contact with ex-Special School boys and girls, after they have commenced employment, are through the After-Care Committees of Voluntary helpers attached to certain schools which the Vocational Guidance Officer is invited to attend, and also at Old Scholars' Parties held in the evening by some of the Special Schools and which provide excellent opportunities for informal discussion with the boys and girls who are present."

W. M. Fryer

*Medical Officer to the
Education Authority.*

MINISTRY OF EDUCATION.

MEDICAL INSPECTION RETURNS, YEAR ENDED 31st DECEMBER, 1951.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

A.—PERIODIC MEDICAL INSPECTIONS.

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS :—

Entrants	...	...	...	...	...	...	...	...	11,968
Second Age Group	...	...	...	...	...	...	...	...	12,248
Third Age Group	...	...	...	...	...	...	...	...	10,147
TOTAL									34,363

NUMBER OF OTHER PERIODIC INSPECTIONS ... 11,362

GRAND TOTAL ... 45,725

B.—OTHER INSPECTIONS.

NUMBER OF SPECIAL INSPECTIONS	...	...	...	...	...	...	45,913
NUMBER OF RE-INSPECTIONS	...	...	...	...	...	...	76,434
							<hr/>
TOTAL					...	...	122,347

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment
(excluding Dental Diseases and Infestation with Vermin).

Group. (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual Pupils. (4)
ENTRANTS ...	241	1,761	1,997
SECOND AGE GROUP ...	1,340	1,463	2,657
THIRD AGE GROUP ...	1,448	797	2,160
TOTAL (PRESCRIBED GROUPS) ...	3,029	4,021	6,814
OTHER PERIODIC INSPECTIONS ...	1,072	1,314	2,311
GRAND TOTAL ...	4,101	5,335	9,125

TABLE II.

A.—Return of Defects found by Medical Inspection in the Year ended 31st December 1951.

Defect Code No.	DEFECT OR DISEASE. (1)	PERIODIC INSPECTIONS.		SPECIAL INSPECTIONS.	
		Number of Defects.		Number of Defects.	
		Requiring Treat- ment. (2)	Requiring to be kept under observa- tion, but not requiring Treat- ment. (3)	Requiring Treat- ment. (4)	Requiring to be kept under observa- tion, but not requiring Treat- ment. (5)
4	Skin	197	449	2,348	37
5	Eyes—(a) Vision	4,101	911	1,406	241
	(b) Squint	1,859	387	389	34
	(c) Other	170	208	3,138	38
6	Ears—(a) Hearing	193	234	59	34
	(b) Otitis Media	189	375	703	22
	(c) Other	120	389	1,787	45
7	Nose or Throat	1,348	3,098	226	192
8	Speech	100	337	49	74
9	Cervical Glands	78	819	7	62
10	Heart and Circulation	2	1,007	—	61
11	Lungs	211	1,260	45	126
12	Developmental—(a) Hernia	39	132	4	4
	(b) Other	101	718	17	55
13	Orthopaedic—(a) Posture	71	463	13	34
	(b) Flat Foot	346	628	40	21
	(c) Other	395	749	56	58
14	Nervous System—(a) Epilepsy	6	94	4	16
	(b) Other	22	209	10	45
15	Psychological—				
	(a) Development	204	400	149	158
	(b) Stability	37	155	26	36
16	Other	375	1,557	26,621	361

B.—Classification of the General Condition of Pupils Inspected during the Year in the Age Groups.

Age Groups. (1)	Number of Pupils In- spected. (2)	A. (Good).		B. (Fair).		C. (Poor).	
		No. (3)	% of col. 2 (4)	No. (5)	% of col. 2 (6)	No. (7)	% of col. 2 (8)
Entrants	11,968	5,170	43·2	6,612	55·3	186	1·5
Second Age Group...	12,248	5,686	46·4	6,452	52·7	110	·9
Third Age Group	10,147	5,510	54·3	4,580	45·1	57	·6
Other Periodic Inspections	11,362	5,018	44·1	6,211	54·7	133	1·2
TOTAL ...	45,725	21,384	46·8	23,855	52·2	486	1·0

TABLE III.

Infestation with Vermin.

(1) Total number of examinations in the schools by the school nurses or other authorized persons	390,270
(2) Total number of individual pupils examined	122,878
(3) Total number of individual pupils found to be infested	21,897
(4) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	1,256
(5) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)... ..	150

TABLE IV.**TREATMENT TABLES.****Group I.—Diseases of the Skin (excluding uncleanness, for which see Table III).**

	Number of cases treated or under treatment during the year	
	by the Authority	otherwise
Ringworm—(i) Scalp	—	81
(ii) Body	140	—
Scabies	99	1
Impetigo	1,048	3
Other skin diseases	943	4
TOTAL	2,230	89

Group II.—Eye Diseases, Defective Vision and Squint.

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint	3,069	48
Errors of Refraction (including squint)	10,532*	114
TOTAL	13,601	162
Number of pupils for whom spectacles were—		
(a) Prescribed at School Clinics	7,511*	—
(b) Obtained... ..	Not known	—

Group III.—Diseases and Defects of Ear, Nose and Throat.

	Number of cases treated	
	by the Authority	otherwise
Received Operative Treatment—		
(a) for diseases of the Ear	48	95
(b) for Adenoids and Chronic Tonsillitis	—	742
(c) for other Nose and Throat conditions	—	77
Received other forms of treatment	3,369	—
TOTAL	3,417	914

* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

Group IV.—Orthopaedic and Postural Defects.

a) Number treated as In-patients in hospitals ...	703	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g., in clinics or Out-patient departments	2,653	11

Group V.—Child Guidance Treatment.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics ...	181	32

Group VI.—Speech Therapy.

	Number of cases treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapists ...	75	—

Group VII.—Other Treatment Given.

	Number of cases treated	
	By the Authority	Otherwise
(a) Miscellaneous minor ailments	26,471	1,096
(b) Other than (a) above (specify)		
1. Heart, including rheumatism and chorea ...	54	373
2. All surgical conditions excluding Tuberculosis	—	524
3. Chest conditions excluding Tuberculosis ...	—	202
4. Tuberculosis, chest and "surgical" ...	—	64
5. Nervous condition	—	20
TOTAL	26,525	2,279

TABLE V.

Dental Inspection and Treatment carried out by the Authority.

(1) Number of pupils inspected by the Authority's Dental Officers :—								
(a) Periodic age groups	...	...	...	...	...	...	...	41,174
(b) Specials	...	...	...	...	...	...	...	4,992
								46,166
						TOTAL (1)	...	
(2) Number found to require treatment	...	...	...	...	...	...	...	26,067
(3) Number referred for treatment	...	...	...	...	...	...	...	26,067
(4) Number actually treated	...	...	...	...	...	...	...	17,868
(5) Attendances made by pupils for treatment	...	...	...	...	...	...	...	24,041
								334
(6) Half-days devoted to : Inspection	...	...	...	...	...	...	...
Treatment	...	...	...	...	...	...	...	2,829
								3,163
						TOTAL (6)	...	
(7) Fillings : Permanent Teeth	...	...	...	...	...	...	...	4,146
Temporary Teeth	...	...	...	...	...	...	...	—
								4,146
						TOTAL (7)	...	
(8) Number of teeth filled : Permanent Teeth	...	...	...	...	...	...	...	3,899
Temporary Teeth	...	...	...	...	...	...	...	—
								3,899
						TOTAL (8)	...	
(9) Extractions : Permanent Teeth	...	...	...	...	...	...	...	6,927
Temporary Teeth	...	...	...	...	...	...	...	31,032
								37,959
						TOTAL (9)	...	
(10) Administration of general anaesthetics for extraction	...	...	...	...	...	...	...	16,163
								1,419
(11) Other operations : Permanent Teeth	...	...	...	...	...	...	...
Temporary Teeth	...	...	...	...	...	...	...	—
								1,419
						TOTAL (11)	...	